

2018 LADIES' RETREAT REGISTRATION

Name: _____

Address: _____

Phone: _____

Email: _____

Date of Birth: _____

Roommate Request: _____

Allergies or concerns we should be aware of:

Please send a \$50 deposit with registration form to:

Pine Brook Camp

210 Lakeview Road

Shutesbury, MA 01072

For Credit Card Payment:

Name on Card: _____

Card #: _____

Expiration Date: _____

Security Code: _____

Amount of payment: _____

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