

REGISTRATION FORM

*Intensive/Post-Intensive Centering Prayer Retreat: 10/25-30, 2020
Sponsored by Contemplative Outreach MD & Washington*

PERSONAL INFORMATION

- First Name _____
- Last Name _____
- Email _____
- Confirm Email _____
- Address 1 _____
- Address 2 _____
- City _____
- Zip Code _____
- Cell Phone _____

RETREAT TRACK (check one)

I want to register for the Intensive Retreat

(The *Intensive* track includes a daily video with discussion of some of Thomas Keating's teachings. If you are relatively new to Centering Prayer, have not attended a Centering Prayer retreat before, or would like a refresher of some of the teachings, choose the *Intensive* track.)

I want to register for the Post-Intensive Retreat

(I have an established Centering Prayer practice and have previously attended a Centering Prayer retreat)

SPECIAL NEEDS

Please list any special dietary or other requests. We will do our best to meet these needs.

RETREAT FEE

| | |
|--|----------|
| <input type="checkbox"/> I have enclosed the non-refundable registration fee. | \$125.00 |
| <input type="checkbox"/> I have enclosed the full payment. | \$690.00 |
| (Full payment includes the non-refundable fee of \$125.00) | |
| <input type="checkbox"/> I am interested in applying for a partial scholarship (Note: you will be contacted with more information) | |

The balance of \$565.00 must be received no later than September 12, 2020.

For registration by mail, complete form & make check out to "Contemplative Outreach of Maryland and Washington (COMW) and send to: Kathleen Blank Riether, 5265 Winter View Drive, Alexandria, VA 22312-3912

For more information, contact Suzi Kindervatter at: skindervatter@gmail.com