REGISTRATION for Arkansas Womens Book Retreat

October 13-15, 2026
Ferncliff Camp and Conference Center
1720 Ferncliff Road, Little Rock, AR 72223

Personal Information

Full Name:	
Address:	
City, State, Zip:	
Email:	Telephone:

Emergency Contact

Name:	
Phone:	Relationship:

Retreat Information

Church Home and City:
Room Preference (check one): Double Room ($180) ____ Single Room ($250) _____
Roommate Request:
Mobility Needs:
Dietary Restrictions:

Additional Information

Questions, Comments, or Special Requests

Signature:	Date:

Questions? Contact

Liz Branch
501.944.9743
erbranch@comcast.net
Catherine Lowry, 501.960.7676,
colowry@gmail.com
Liz Larkin, (479) 899-8197,
hedgeroad@gmail.com
Candice Misenheimer, 501.749.1934,
canmisen@gmail.com

Total cost $180 Double // $250 Single

Please make checks payable to:
Womens Book Retreat

Mail to:
Candice Misenheimer
8100 Cantrell Rd Apt 502
Little Rock AR 72227

IN ORDER TO BE COMPLETE
The registration form must be accompanied by the Waiver of Liability and Image Consent and Release Form that you need to sign in TWO places on page 2.

WOMENS BOOK RETREAT
RELEASE AND WAIVER OF LIABILITY

Supporting organization currently is Westover Hills Presbyterian Church Little Rock; and may include others.

I declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity, or other illness that would prevent my participation in any activity at the retreat, and I will terminate my participation if I believe conditions have become unsafe. I knowingly and freely assume all such risks related to injury, illness and infectious diseases, even if arising from the actions, omissions, negligence or fault of others, including, but not limited to, Ferncliff Camp and Conference Center (Ferncliff), Womens Book Retreat (WBR), or supporting organizations, their employees, or volunteers. I understand that Ferncliff, WBR, and any supporting organizations assume no responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, accident, monetary loss, or property damage.

I acknowledge that my participation in this retreat includes risks of injury, or possible exposure to and illness from infectious diseases including but not limited to COVID-19, and that such risks could result in physical and economic losses, including personal and/or bodily injury, illness, permanent disability, and death.

I hereby release and forever discharge Ferncliff, WBR, its officers, directors, employees, agents, representatives, volunteers, and assigns, or supporting organizations, from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered to me or to my dependents or companions in connection with an emergency or health problem during my participation in the retreat.

I further agree to indemnify, defend, and hold harmless Ferncliff, WBR, supporting organizations, their officers, directors, employees, agents, volunteers, and assigns, from and against any and all liabilities, claims, demands, actions, and causes of action whatsoever, and any related losses, damages, injuries, and expenses, including but not limited to attorneys' fees, arising out of or resulting from injury, or the exposure to COVID-19 or any other communicable illness, by me while engaged in the performance of these retreat activities or any related activities.

This document is a release of claims. I represent to Ferncliff, WBR and supporting organizations that I am in good health and physical condition and I agree to all of the foregoing. This contract and any claims arising hereunder or relating hereto, including all matters of construction, validity and performance, as well as all claims sounding in tort, shall in all respects, be governed by, and construed and enforced in accordance with, the laws of the state of Arkansas, without regard to principles of conflict or choice of law rules of any jurisdiction.

Print Name	Signature	Date

IMAGE CONSENT AND RELEASE FORM

YES -- I hereby consent to be photographed, videotaped, audiotaped, and/or interviewed during my participation in a retreat being hosted by Womens Book Retreat (WBR).

I hereby grant WBR the unlimited right to use, reuse, publicly display, disseminate to media, publish and/or republish, in any manner or medium, now or later developed, my name, likeness and any and all video, photographic or other images of me taken by or on behalf of the Retreat for the purpose of illustrating, advertising and promoting the Retreat, other WBR retreats and the WBR program.

In addition, I grant WBR, supporting organizations, and the Presbytery of Arkansas the same unlimited right to use, reuse, publicly display, disseminate to media, publish and/or republish in any manner or medium, now or later developed, my name and any and all written or spoken statements by me for the purpose of advertising and promoting the WBR mission, program and retreats. Please be aware that while you may request that WBR not include you in our photos, we have no control over others using cameras or how photos will be displayed.

I understand I will not be compensated in any way for any of these uses or have any right to examine or approve these uses. I agree to release the WBR, supporting organizations, and the Presbytery of Arkansas from all claims and liability relating to the use of my name, likeness, photograph, image or statement. The WBR, supporting organizations, and the Presbytery of Arkansas have the right to change, modify or alter this material in any way without my prior permission, and I hereby waive any and all rights with respect to such changes, modifications or alterations.

Print Name	Signature	Date

____ I do not wish to be photographed or videotaped, and will endeavor to remove myself from these activities.