



THE CENTER(S) FOR CHRISTIAN STUDIES

Pre-Lenten Retreat - Feb. 16-18, 2007

Registration Form

Name _____

Address _____

Phone _____ E-Mail _____

Parish _____

I would like:

_____ Single (\$260. includes two nights and five meals)

_____ Double (\$195. per person includes two nights and five meals)

I would like to room with _____

Please make check payable to CCS and mail to P.O. Box 5978, Asheville,
NC 28813.

