

**2007 Indiana-Kentucky Synod Candidacy Retreat  
 ++ Friday August 24 to Saturday August 25, 2007 ++  
 Waycross Episcopal Conference Center and Camp  
 Morgantown, Indiana  
 Registration Form**

Candidate Name \_\_\_\_\_ Male      Female

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Spouse/Fiancé/e (if attending) \_\_\_\_\_ Male      Female

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

*Most rooms are double occupancy with two twin beds and a private bath. A few rooms have one double bed and will be assigned to married couples in the order in which registrations are received. Please let us know your plans and preferences regarding housing:*

- I'll stay at Waycross.** (registration includes dinner Friday and breakfast and lunch Saturday)
  - I'll stay Friday night only. *(If your plans change and you decide you won't spend the night and don't let us know a week beforehand, you will be responsible for the cost of the room, \$76 per night.)*
  - I would like to come in the day before the retreat (Thursday Aug. 23), so I'll need a room Thursday night, too.
    - o Cost: \$50.00. This will include dinner Thursday & breakfast and lunch Friday. Please add this to your registration fee.
  - I would prefer to room with: \_\_\_\_\_
  - I do not have a roommate preference.
  - I am willing to stay in overflow housing with 4 or 5 twin beds.

*If your fiancé/e is accompanying you:*

- My fiancé/e would prefer to room with: \_\_\_\_\_
- My fiancé/e does not have a roommate preference.

**I/We will stay elsewhere and will need the following meals (circle):**      Dinner Fri      Breakfast Sat      Lunch Sat

**I will participate in the Myers-Briggs workshop Friday afternoon at 1:00 p.m.** *(Cost: \$10.00. If you plan to arrive Thursday and stay at Waycross, please check the appropriate box above and add \$50.00 to your registration fee.)*

I will need lunch at noon on Friday before the workshop begins.

Other information important for the planning team to know (e.g. dietary needs, etc.):

*All buildings at Waycross, including bedrooms, are smoke-free. Pets are not allowed.*

**Include payment per person by 8/1/07, check payable to:**

Indiana-Kentucky Synod, ELCA  
 Attn: April Lynch  
 911 E 86<sup>th</sup> St, Suite 200  
 Indianapolis, IN 46240  
 Phone (317) 253-3522; Fax (317) 254-5666

| <u>Registration fees (per person)</u>        |          |
|--|----------|
| <input type="checkbox"/> Retreat             | \$50     |
| <input type="checkbox"/> Thursday night stay | \$50     |
| <input type="checkbox"/> Myers-Briggs wkshp  | \$10     |
| TOTAL  | \$ _____ |