

Get Inspired!



## Retreat Season (Fall/Winter/Spring ) Adult/Family Registration Form

Please print and use one form per person or per family unit. Copy as needed. Or register online at [www.novusway.com](http://www.novusway.com).

Name of program \_\_\_\_\_ Dates \_\_\_\_\_

Please select which camp the program is at: Lutheridge Lutherock Luther Springs (FL) Lutheranch (GA)

Do any of the following apply? On Site Participant Commuter Group Participant

Participant 1 Name \_\_\_\_\_  Male Female DOB: \_\_\_\_\_  
(As it should appear on your nametag)

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Participant 2 Name \_\_\_\_\_  Male Female DOB: \_\_\_\_\_  
(As it should appear on your nametag)

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name(s) and age(s) of child(ren) attending your program with you: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (\_\_\_\_\_) \_\_\_\_\_ Please circle: work or cell phone (\_\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Home church name/location \_\_\_\_\_

Emergency contact name/number \_\_\_\_\_

Rommmate Request/Housing Preference: \_\_\_\_\_

Dietary Need/Food Allergies: \_\_\_\_\_

Mobility Concerns: \_\_\_\_\_

**PAYMENT INFORMATION:** Full payment is due with registration. Online registrations require credit card payment.

Total Enclosed \$ \_\_\_\_\_ Check Money Order Visa MasterCard Discover Card AMEX

Please charge my credit card: Card number \_\_\_\_\_ Expiration date \_\_\_\_\_

3 Digit Security Code: \_\_\_\_\_ Name on card \_\_\_\_\_

Signature \_\_\_\_\_

**CANCELLATION POLICY for programs of three nights or less:** Cancellation requests must be in writing. Email to [registration@novusway.com](mailto:registration@novusway.com), fax to 828-687-1600 or mail to NovusWay Registration, 2049 Upper Laurel Drive, Arden, NC 28704. All Cancellations are subject to a 35% administrative charge. If you cancel with less than 10 days notice, we regretfully will be unable to credit or refund any registration fees.

NovusWay Registration • 828-209-6302 • fax 828-687-1600 • [registration@novusway.com](mailto:registration@novusway.com) • [www.novusway.com](http://www.novusway.com)