

ECHO Retreat for Young People Registration Form

Monday 23 - Friday 27 October 2017

Please complete all four of the following sections.

1 Personal Details

Name			
Date of birth	DAY	MONTH	YEAR
Phone number			
Address			
Parish			
Diocese			
Email address			
Dietary/Special requirements	Anything important we ne this retreat?	ed to know about you to hel	p you make the most of
Emergency contact			
Emergency contact number			
Relationship to emergency contact			

2 Method of Payment (Please select one)

Cheque Payable to: WRCDT-Youth	
Online payment Reference: DOWYM Account no: 81672134 Sort code: 40 05 20	
3 Retreat Information	
How did you hear about this retreat?	
Briefly, what are your hopes for this retreat?	
Just so we know, how much do you know about Theology of the Body already?	Any previous retreats, reading, or prayer groups? Doesn't need to be an exhaustive list, but to give us an idea of where you are at.