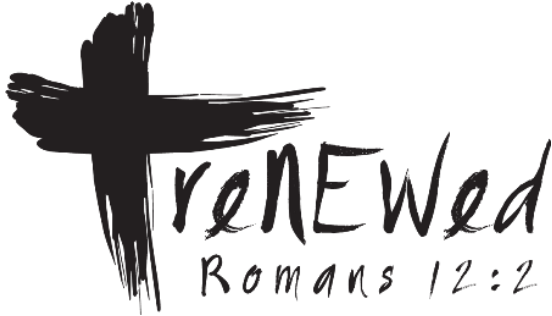


# ReNEWed

## 2019 - 2020 GROUP Registration Form & Payment Information

**How to Register:** This Payment Information sheet is the cover sheet for your group. Each attendee must complete and sign a *Liability/Medical Release Forms "E"*. **Deadline is 8 days** prior to Retreat

Note: Space is limited; depending on parish hosting the retreat. (first come first serve)



### ReNEWed

- *Dates are subject to change*
- *Cost might be different at some location*
- *Some retreats are restricted to certain age groups*

Visit the web site for any changes on dates or call the Diocesan youth office:

[www.amarillodiocese.org/youth](http://www.amarillodiocese.org/youth)  
[www.covenantteen.com](http://www.covenantteen.com)

#### CANCELLATION POLICY

There is no refund for canceling or 'no shows' unless the Diocese has canceled the retreat. (You may substitute with no additional charge)

**Late Registration is \$10 extra.**  
Call Oscar at 806-383-2243 ext. 118  
for availability

#### GROUP CONTACT INFORMATION:

Parish Name: \_\_\_\_\_

Youth Minister: \_\_\_\_\_

Parish Address: \_\_\_\_\_

City: State: Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### LOCATIONS:

Date: \_\_\_\_\_

Place: \_\_\_\_\_

#### PAYMENT INFORMATION:

**Cost: depends on parish**

Mail registration forms and payment to:

Diocese of Amarillo  
Attn: Youth Office  
4512 NE 24<sup>th</sup> Ave.  
Amarillo, Texas 79107

**FAX: 806-383-8452**

Check is enclosed for \$ \_\_\_\_\_

*Please make check payable to: Diocese of Amarillo*

Make as many copies as needed  
Please PRINT clearly



### Sponsors

Total	Name	Female/Male
1		
2		
3		
4		
5		
6		

### Youth

Total	Name	Female/Male	Age
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

**DEADLINE: 8 days prior to retreat --- Don't forget the Medical/Liability Release Forms**