

REGISTRATION INFORMATION

REGISTRATION FEE

\$430 per person includes \$245 tuition and \$185 meals and facility use.

EARLY BIRD DISCOUNT

Save \$20 by registering before March 29

PARISH TEAM DISCOUNT

Save \$10 per person when you register 2 or more participants from the same parish at one time. Complete one form for each participant.

Meals	Break-fast	Lunch	Dinner	Snacks	Receptions/Socials
Day One	●	●	●	●	●
Day Two	●	●	●	●	●
Day Three	●	●	●	●	●
Day Four	●	●		●	

OVERNIGHT ROOM FEE (3 nights)

If lodging at the retreat center, each person pays an additional **\$120** for a single room and **\$60** per participant for a shared room.

** In order to request a double room, you must have your own roommate. If no roommate is provided, we will try and find a roommate but if we are unable to, you will be responsible for the single room rate**

RITUAL TEXT

You must bring a copy of *The Rite of Christian Initiation of Adults* (1988 Study Edition) to the institute. Please bring your own text, or reserve a copy by including payment of \$25.00 with your registration. Your reserved copy will be available when you check in for the institute.

CONFIRMATION

Upon completion of your registration, you will receive a confirmation packet containing additional information and specific instructions on how you should prepare for the institute. The packet will also include a detailed institute schedule and directions to *Bishop DeFalco Retreat Center*.

Please be reminded: you are not registered for this institute until payment is complete. Once fees are paid in full, you will receive your confirmation packet within 4 weeks of registering. Please contact Forum Registration at 202-884-9758 for questions.

CANCELLATIONS AND REFUNDS

All requests for cancellations **must be submitted in writing**. Include your name, address, the institute and institute location and date. You can fax (201-661-2862), email (info@naforum.org), or mail your notification to the following address:

*The North American Forum
on the Catechumenate
125 Michigan Avenue, NE
Washington, DC 20017-1102
ATTN: Institute Registration*

TUITION

80% refund for cancellations before June 1
50% refund for cancellations on or after June 1

FACILITY & MEALS

\$50 non-refundable fee for cancellations
No refund for cancellations on or after June 11

**The Diocese of Amarillo
and the North American Forum on the Catechumenate
reserve the right to cancel an Institute due to extenuating circumstances,
such as low registration. Should this occur, you will receive a full refund.**

REGISTRATION FORM

Please complete one form per participant

THE INITIATION EXPERIENCE: BEGINNINGS PLUS (with focus on adults & children)

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Participant Mailing Information

Bishop DeFalco Retreat Center, Amarillo TX

June 29-July 2, 2010

PLEASE PRINT

Bishop, Brother, Deacon, Mr., Mrs., Ms., Rev., Sr. (Circle one)

Please list additional information (dietary requirements, special needs request, etc.)

Name: _____
first last

Home Address: _____

City: _____ State/Prov.: _____ Zip: _____

Phone: [] [] [] [] [] [] [] [] E-mail or Fax: _____

Diocese: _____ Church Denomination: _____

Parish Name and City: _____

Roommate: _____

Special Needs: _____

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Institute Fees: Per Person

REGISTRATION (\$245 Tuition + \$185 Meals & Facility Use) \$430

Early Bird discount: before March 29...Deduct \$20..... -\$

Parish Team Discount: 2 or more registering from one parish. Deduct \$10..... -\$

A TOTAL REGISTRATION \$

B OVERNIGHT ROOM (3 nights)
 Single Room\$120..... +\$

Double Room\$60..... +\$

C PREVIOUS DAY ARRIVAL
 Single Room\$40..... +\$

Double Room\$20..... +\$

Dinner.....\$11..... +\$

D RITUAL TEXT, Check one
 I will bring a copy of the Ritual Book
 Reserve my copy, \$25.00 enclosed..... +\$

E DONATION.
 I am making a contribution to the scholarship fund..... +\$

TOTAL ENCLOSED
 A + B + C + D + E..... \$

REMINDERS: * one form for each participant * full payment required with registration * 2 or more registrations for team discount

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Before June 1

You may phone (202-884-9758) or fax (201-661-2862) your registration with MasterCard, VISA or Discover.

%VISA %MASTERCARD %DISCOVER

 Name as it appears on card

[] [] [] [] [] [] [] []
 Credit Card Number

Expiration Date: ____/____

 Signature

Cardholder's _____
 Address and _____
 Phone _____
 number: _____

You may also mail your registration with a check or money order to the address below. Please include full amount; we cannot register you with partial payment. There is a \$25.00 fee for returned checks.

Mail to: The North American Forum
 on the Catechumenate
 Institute Registration
 P. O. Box 79459
 Baltimore, MD 21279-0459

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After June 1

, We can accept your registration by phone (202-884-9758) or fax (201-661-2862) with credit card payment. We cannot guarantee placement at the institute after this date.