

For Office Use Only

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Glow Retreat Registration Form

Webster Conference Center, Salina, KS

April 13 & 14, 2012

Please copy as needed

Group Leader _____ Church _____

Leader Address _____ City _____ State _____ Zip _____

E-mail _____ Daytime phone _____

Payment must accompany registration. Make checks payable to KNCSB. Number Attending _____ x \$35 per person = \$ _____

Mail to: *Women's Leadership, 5410 SW 7th St, Topeka, KS 66606-2398* (\$40 per person after March 13th)

Include Registration, Sponsor forms, Medical Release forms, and payment.

Registration is complete when all forms and payment have been received.

Adults: L-Leader, M-Mother

| Name | School Grade | Adult (L, M) | E-mail | Special Needs |
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Questions? Call KNCSB at 1-800-984-9092 or 785-268-6800 or E-mail hnelson@kncsb.org