

**Redeemer's All-Parish Weekend 2019**  
**Friday, October 25 - Sunday, October 27**  
**Barbara C. Harris Camp & Conference Center**

To guarantee your space, PLEASE REPLY by **September 10** (or sooner!) with full payment. After that date, we will try to accommodate late registrations until October 8.

- Overnight fees are for 2 nights (no reduction for 1 night only) and 5 meals (Sat. and Sun. breakfast and lunch, and Sat. dinner). Please indicate your preference for a regular cabin, adult friendly/4-person cabin, or lodge room. If you wish, please also indicate with whom you want to share a room or cabin (person or family).
- WE will try to accommodate your request and notify you if your 1<sup>st</sup> choice is not available. We have only 4 Adult Cabins this year.
- All rates below are **PER PERSON** (e.g. a couple sharing a lodge room is \$400). There is a \$250 cap for families staying in a regular cabin or the Bunkhouse.
- We appreciate extra donations that support the family cap, speaker and staff costs, and other group costs. Please give generously if you can.

Call Steve Burns at 978-902-1437 or email Cathy burns at hcburns5@gmail.com any questions.

		Adults/Teens	Children (ages 3-11)	Children (ages 0-2)	Preference
Regular Cabin or Bunkhouse	5 or 6 sets of bunk beds & two bathrooms BYO Bed linens & Towels	\$125*	\$60*	Free	
Adult Cabin	4 twin beds & two bathrooms (shared), Bed linens & towels provided	\$160**	\$80**	Free	
Lodge Room (shared)	Hotel-style room w/ private bath (2 double beds, or 1 double & 1 single) Bed linens & towels provided	\$200	\$90	Free	
Lodge Room (single)	Hotel-style room w/ private bath (2 double beds, or 1 double & 1 single) Bed linens and towels provided	\$275	N/A	N/A	
Day Visit only	Sat activities and lunch	\$40	\$40	Free	

\* \$250 Family cap (regular cabins and Bunkhouse only)

\*\* If there are only two people in an adult cabin, the rates are the same as a lodge room; so the retreat leaders are likely to assign at least three people to each adult cabin.

<b>Total # in Party</b> _____	<b>Adults/Teens (12+):</b> _____	<b>Children (3-11):</b> _____	<b>Children (0-2):</b> _____
<b>Age of children</b>	____/____/____/____	____/____/____/____	____/____/____/____

**Names in Party:** \_\_\_\_\_

**Primary Contact:** \_\_\_\_\_

**Phone & e-mail** \_\_\_\_\_

**Special Needs** \_\_\_\_\_

**Food Allergies/Requests** \_\_\_\_\_

Will share a cabin/lodge room with \_\_\_\_\_

Will you stay for Sunday lunch? Yes \_\_\_ No\_\_\_ (This is to avoid wasting food - no change in room rate)

For office use only: Date received: \_\_\_\_\_

Payment Calculator:

Lodging Type	Number of persons	Multiply by Rate	Amount
Regular Cabin - Adult		\$125	\$
Regular Cabin - Child (age 3-11)		\$ 60	\$
Or, Regular Cabin - Family Cap, if less		\$250	\$
Adult (4-person) Cabin - Adult/teen		\$160	\$
Adult (4-person) Cabin - Child (age 3-11)		\$ 80	\$
Lodge Room - Adult/teen double occupancy		\$200	\$
Lodge Room - Child (age 3-11) double occupancy		\$ 90	\$
Lodge Room - Adult single room		\$275	\$
Saturday - Day visit only		\$40	\$ _____
Subtotal			\$
Add: Additional Donation (1)			\$
Less: Financial Assistance Requested (2)			(\$ _____)
<b>TOTAL</b>			<b>\$ _____</b>

(1) Your additional contribution will support staff costs, the subsidized family cap, speaker costs, and other shared costs. Thank you

(2) We want everyone to be able to attend, so confidential financial scholarship assistance is available. If you need assistance for a portion or all of the registration fees please indicate the amount you need above.

Mail registration & payment to:

Church of Our Redeemer

Fall Weekend

6 Meriam St.

Lexington, MA 02420

Please indicate "Fall Weekend" on the envelope and in the memo section of your check(s).