

# HOLY SPIRIT CATHOLIC CHURCH ACTS RETREAT REGISTRATION

You must be 18 years or older. Priority reservation will be granted to Holy Spirit Catholic Church parishioners.

---

**Retreatant Name (First, Last)** **Email**

---

Address

---

Home Phone Cell Phone Work Phone

---

Parish or Church Birthday (month/day) T-Shirt Size

---

Please list special needs (allergies, special diet, medical, mobility, etc.)

---

**Primary Emergency Contact** **Relationship** **Email**

---

Address

---

Home Phone Cell Phone Work Phone

---

**Backup Emergency Contact** **Relationship** **Email**

---

Address

---

Home Phone Cell Phone Work Phone

**Send completed registration form with your \$210 retreat fee or \$100 registration deposit to:**

Holy Spirit Catholic Church  
1111 W. Daniieldale Rd.  
Duncanville, TX 75137

**Make checks payable to: Holy Spirit Catholic Church ACTS Retreat**  
Amount Paid: \$ \_\_\_\_\_



**Register Online:** [www.holyspiritcatholic.com/acts-retreats](http://www.holyspiritcatholic.com/acts-retreats)

**Register in person:** At the front desk of the Community Center at Holy Spirit Catholic Church

**Circle Type of Retreat:**    Men        Women        **Retreat Date:** \_\_\_\_\_

*For More Information Call: Holy Spirit: 972-298-4971 or Email: [hscacts@gmail.com](mailto:hscacts@gmail.com)*

**\* \* \* You will receive a letter prior to the retreat listing the necessities to bring for the weekend \* \* \***