

# FUSION | YOUTH RETREAT

## Group Registration Form

Please complete this group registration form and send it with a deposit to reserve your space. Then distribute the individual registration forms for each student attending and submit them when you arrive for the event.

Contact Name: \_\_\_\_\_

Church: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

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Please select the date you plan to attend:       Nov. 8-10       Nov. 15-17

Please select what type of lodging your group prefers:       Indoor       Rustic  
*Lodging preference will be honored on a first-come, first-served basis.*

**Number of Middle School Participants:**      Male \_\_\_\_\_  
Female \_\_\_\_\_

**Number of High School Participants:**      Male \_\_\_\_\_  
Female \_\_\_\_\_

**Number of Adult Chaperones:**      Male \_\_\_\_\_  
*(Each church must provide an adult leader of each gender attending with a maximum ratio of 7 to 1)*      Female \_\_\_\_\_

**Total Cost [indoor]:** number of students & adults x \$120 (\$110 on/before Sept. 27) = \_\_\_\_\_

**Total Cost [rustic]:** number of students & adults x \$80 (\$75 on/before Sept. 27) = \_\_\_\_\_

**Non-refundable deposit:** total number of participants and chaperones x \$30 = \_\_\_\_\_  
*REMAINING BALANCE IS DUE WHEN YOUR GROUP ARRIVES AT CEDARKIRK.*

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Please return this form and deposit (make checks payable to "Cedarkirk") to:  
**1920 Streetman Drive  
Lithia, FL 33547-1822**

**Contact the Cedarkirk office with any questions:  
[camps@cedarkirk.org](mailto:camps@cedarkirk.org) or (813) 685-4224, ext. 2.**