

Retreat Registration

(THIS PORTION OF FORM REQUIRED FOR EACH REGISTRANT)

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone: _____

Email: _____

Name Tag Name: _____

Roommate (if applicable): _____

Please mail \$25 deposit and registration form immediately to reserve a spot. Balance is due by March 15th (see mailing instructions on back).

Additional Options:

_____ **I want to be placed on a waiting list.**
(Otherwise, your check will be returned to you if the retreat is full.)

_____ **I require a handicap bath facility.**
(If all handicap facilities are taken and you require one, your check will be returned.)

_____ *** I am willing to share a room if the singles are full.**

_____ **** I am willing to pay for a single if the doubles are full.**

FOR QUESTIONS AND CONCERNS,
CALL MARY ELLEN:

845 562-1342

DURING THIS RETREAT, WE WILL BE STUDYING THE TWELVE STEPS OF OA. IT IS IMPORTANT FOR RETREATANTS TO PARTICIPATE FULLY IN ALL SESSIONS, STARTING AT 7:30PM ON FRIDAY, TO REAP THE FULL BENEFIT OF THE RETREAT.



PAYMENT REMINDERS

You will receive confirmation of registration via email or US mail.

No refunds will be given for cancellation **unless your spot can be filled.**

Additional copies of this flyer can be found at

www.midhudsonoa.org

For Room & Board:

Make check or money order out to

St. Lawrence Friary.

For 7th Tradition Donation:

Make check or money order out to

Mid-Hudson Intergroup.

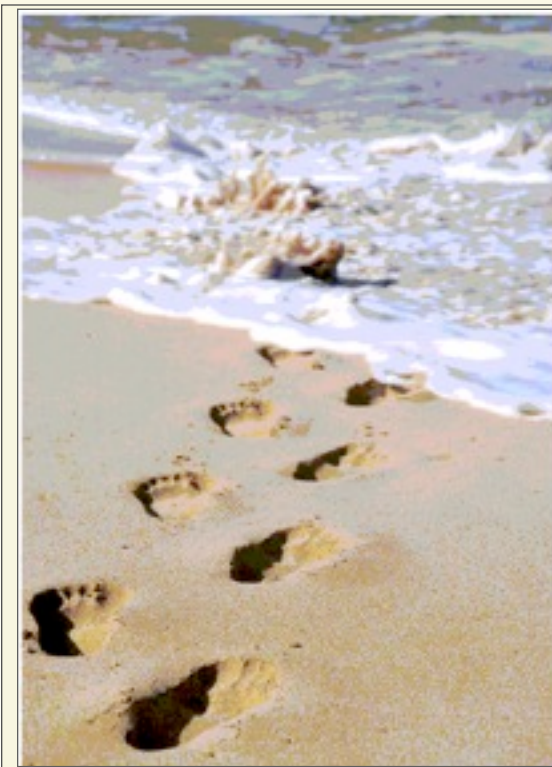
Balance due by March 15, 2010.

Mail all checks and/or money orders to:

REGISTRAR
MID-HUDSON INTERGROUP RETREAT
74 BOSTOCK ROAD
SHOKAN, NY 12481-5400

STEP INTO RECOVERY

MID-HUDSON INTERGROUP
SPRING RETREAT 2010



✿ MAY 21-23 ✿

ST. LAWRENCE FRIARY
180 SARGENT AVENUE
BEACON, NY 12508

RETREAT OVERVIEW:

SURROUNDED BY NATURE IN A PEACEFUL SETTING, OUR RETREAT LEADER WILL GUIDE US THROUGH A STUDY OF THE 12 STEPS OF OA.

BY SHARING THEIR EXPERIENCE AND FELLOWSHIP WITH OTHER MEMBERS, WE WILL EXPLORE HOW THE STEPS CAN MAKE A DIFFERENCE IN OUR LIVES.

RETREAT LOCATION:

St. Lawrence Friary in Beacon has a newly renovated retreat center with 20 bedrooms with private baths. Six of the rooms have trundle beds to accommodate two people sharing a room for \$125 per person. There are also a limited number of rooms equipped with handicap accommodations. Meals will be planned to meet basic eating requirements. MHIG is asking for a \$25 donation from each retreatant to cover expenses and the Retreat Leader's travel, expenses and room and board.



SPRING RETREAT SCHEDULE

FRIDAY PM

4:00 - 5:45 Registration
 5:45 - 6:45 DINNER
 6:45 - 7:45 Registration
 7:45 - 8:00 Welcome/ Announcements /
 Speaker Introduction
 8:00 - 8:45 Speaker Qualifies Step 1, 2, 3
 8:45 - 9:30 Groups Write/Share on
 Steps 1, 2 3
 9:45 - 10:15 Meditation

SATURDAY

7:45 - 8:15 Meditation
 8:30 - 9:30 BREAKFAST
 9:45 - 10:45 Speaker Shares on Steps 4 & 5
 11:00 - Noon Groups Write/Share on
 Steps 4 & 5
 12:15 - 1:15 LUNCH
 1:30 - 2:45 Speaker Shares on Steps 6 & 7
 3:00 - 4:15 Groups Write/Share on
 Steps 6 & 7
 4:30 - 5:30 Quiet Reflection
 5:45 - 6:45 DINNER
 7:00 - 7:45 Speaker Shares on Steps 8 & 9
 7:45 - 8:30 Groups Write/Share on
 Steps 8 & 9
 8:45 - 9:15 TBD

SUNDAY

7:45 - 8:15 Meditation
 8:30 - 9:30 BREAKFAST
 9:45 - 10:30 Speaker Shares on
 Steps 10, 11 & 12
 10:30 - 11:30 Groups Write/Share on
 Steps 10, 11 & 12
 11:30 - 12:00 Closing
 12:15 - 1:15 LUNCH

RESERVATION OPTIONS

- Detach and send to Registrar -

PLEASE CHECK YOUR PREFERENCE BELOW		
* PRIVATE ROOM WITH BATH 6 MEALS	\$150	_____
** DOUBLE ROOM WITH BATH 6 MEALS	\$125 PER PERSON	_____
NON-RESIDENT ATTENDEE 6 MEALS	\$60	_____
Deposit due NOW to reserve:		\$25
Balance due by March 15th. Make check out to St. Lawrence Friary		_____
7TH TRADITION DONATION TO COVER RETREAT EXPENSES (SUGGESTED). MAKE CHECK OUT TO MID-HUDSON INTERGROUP.		\$25
MAIL ALL CHECKS TO: RETREAT REGISTRAR MID-HUDSON INTERGROUP 74 BOSTOCK RD SHOKAN, NY 12481-5400		