

The Bishop's Retreat
All Saints Episcopal Center
October 31 - November 1, 2008

Reservations Form

Name _____

Address _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Please register me for the weekend from dinner on Friday evening through mid-afternoon on Saturday.

Special Dietary needs: _____

Please choose your accommodations:

____ Room in new Inn - double bed with private bath and meals - \$75

____ Additional person sharing bed - \$35 including meals.

____ Room in dorm with common bath and meals - \$50

Please enclose a check payable to "All Saints Episcopal Center" and send it to:

All Saints Episcopal Center, 833 Hickory Grove Rd., Leitchfield, KY 42754

Reservations are due no later than October 27, 2008