

COMMISSION on MINISTRY CONFERENCE

Barbara C. Harris Center

108 Wally Stone Lane, Greenfield, NH

Beginning at 10:00 am on Friday, March 27, 2015 and ending at 2:30 pm on Saturday, March 28, 2015

Please RSVP and indicate the following:

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

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I prefer the following (choose one option):

**\_\_\_\_ I would like to stay overnight in a shared room:**

\_\_\_\_ I would like to share a room with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR

\_\_\_\_ Feel free to place with me a roommate

**\_\_\_\_ I would like to stay overnight in a single room** ($50 donation please, make check out to Episcopal Diocese for NH and write “COM retreat” in the memo line)

**\_\_\_ I will commute back and forth to the meetings on Friday and Saturday and will not stay overnight:**

 But please count me in for the following meals:

 \_\_\_ Lunch on Friday

 \_\_\_ Dinner on Friday

 \_\_\_ Breakfast on Saturday

 \_\_\_ Lunch on Saturday

**\_\_\_ I am sorry, but I can’t make it!**

I have the following special needs or dietary restrictions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_