



Make check payable to Godly Girlfriends Retreats  
Mail to Godly Girlfriends Retreats  
PO Box 606, Snyder, TX 79550  
Or register and pay online  
[www.godlygirlfriendsretreats.org](http://www.godlygirlfriendsretreats.org)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

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

Church Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Roommate Request: \_\_\_\_\_

Please note special needs or requests that we need to be aware of: \_\_\_\_\_

\_\_\_\_\_

Liabilities Release: I hereby release, discharge, and agree to indemnify and hold harmless The Godly Girlfriends' Retreats, the camp facility, staff, all sponsoring organizations, and their directors, officers, employees, agents, and volunteers from any responsibility, liability, personal and otherwise, claims, loss, or damage arising out of and/or alleged to arise out of my participation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY:	
AMOUNT PAID: _____	
DATE PAID: _____	CHECK # : _____ CASH: _____ PAYPAL: _____
LIABILITY RELEASE SIGNED: _____	