



Catholic Charismatic Renewal of New Orleans

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Celebrate the Golden Jubilee with CCRNO!

Healing Retreat for Men and Women

"Rise and Be Healed"

September 29 - October 1, 2017

Lumen Christi • Schriever, LA

Fr. Richard McAlear, OMI



REGISTRATION

Lumen Christi Residents:

Lumen Christi has increased its fees, making it necessary for CCRNO to increase as well.

Note: Married couples will be assigned a queen bed. Private room will also be a queen bed.

- 1 Queen or 2 twin beds, two people per room – \$200.00 per person
- Private room - \$250.00 single occupancy

All residents receive meals: 3 Sat, 1 Sun

Minimum Deposit \$100.00

Note: Those wishing to room together: send registration forms and deposits in same envelope, each completed. Please note name of roommate.

Commuters: Responsible for your own housing. Please pay in full when registering.

Weekend Commuters:

\$125.00 per person (Sat. lunch, supper)

Saturday Commuters:

\$100.00 per person (Sat. lunch, supper)



Balance Due Policy:

\$10 increase per person per category after Noon, 9/8.

Refund Policy:

Requests made by Noon, September 8, honored for full amount. After September 8: \$65 fee. No refunds for cancellations within 3 weeks of retreat. Exception: medical emergencies. No transfer of payments between retreats.

NOTES:

- For adults 18 years and older.
- No Friday meal. Opening session 7:30 p.m.
- Lumen Christi residents: arrive after 4:00 p.m.
- Commuters: after 6 p.m.
- Retreat concludes with Mass Sunday ending about 12:30 p.m.
- Retreat limited to 100 people. Register early!!

HOLY SPIRIT RETREAT FOR MEN AND WOMEN

September 29- October 1, 2017

Please Print

Name (if couple -Husband) _____

(Wife) _____

Address _____

City _____ State _____ Zip _____

Phone (H) (____) _____ (C) (____) _____

Email _____

Is this your first CCRNO retreat? _____

Are you baptized in the Holy Spirit? _____

Disabled? Please specify. _____

Are you a Doctor/Nurse? _____

For those who wish to room together, your registration forms must be mailed in together. Each person must register. Check must include names of everyone it covers. If this is not done, we cannot process your form.

1. _____

PAYMENT:

Please pay in full when registering, if at all possible.

Residents:

\$200 per person – Queen or Twins.....\$ _____

\$250 per person – Private Room Queen.....\$ _____

\$100 deposit per person.....\$ _____

Commuters: (Not staying on site)

\$125 entire weekend person.....\$ _____

\$100 Saturday only per person.....\$ _____

\$10 Increase per person/category after Sept 8 noon.\$ _____

Donation.....\$ _____

TOTAL.....\$ _____

Balances are due before Noon, September 8. Mail to:
CCRNO, PO Box 7515, Metairie, LA 70010-7515

Or Register online at www.ccrno.org