

'From Strangers to Friends - Together We Belong'
Registration Form

Name / s:

Parish Name:

Phone: *Home*:..... *Mobile*:

Email address:.....

ACCOMMODATION:

Please tick where appropriate: I / We will be staying on:

Both Friday & Saturday nights ____ Friday night only ____ Saturday night only ____

*Some bedrooms at Holy Cross are upstairs.

Please tick if you would prefer **NOT** to be upstairs. ____

MEALS: please circle if any of the following apply:

Gluten Free Dairy Free Vegan Celiac Vegetarian

If Vegetarian, please specify what you cannot consume.....

.....

Please Mention Allergies:.....

TRANSPORT:

If you plan to travel by Public Transport, please tick if you would like to be collected from the train station or bus stop closest to Holy Cross. ____

PAYMENT:

The cost is **\$60 per person** for all or part of the weekend. Please forward payment by:

a) EFT to Account Name: Passionist Family Group Movement

BSB: 063 494 (CBA) Account: 10059744

Reference: Your name / s (as above)

OR

b) Cheque made payable to: *Passionist Family Group Movement* (Please enclose your cheque with the completed form.)

****Please scan & email this completed page to: pfgm.victas@gmail.com OR**

Send by post to: **Passionist Family Group Movement**
Holy Cross Retreat
207 Serpells Road
TEMPLESTOWE VIC 3106