

Detach & Mail to: Dolly Quick – PO Box 326 Circle, MT 59215 Or Register on-line at
www.montanaaglow.org

Registration Form Montana Aglow Spring Retreat May 4-6, 2018

Name _____

Phone _____

Address _____

Zip _____

City _____

State _____

Email _____

Enclosed:

___ I pre-registering for all sessions. - - - - - \$
_____ (\$55)

___ We are registering as a married couple - - - - - \$
_____ (\$90)

___ I **am** a 1st time Aglow attendee: I am registering with _____ \$
_____ (\$45)

___ I am registering **with** a 1st time attending, their name is _____ \$
_____ (\$45)

___ I am registering in the Generations age group (16-35 yrs old) – I am _____ yrs old \$
_____ (\$35)

___ I am registering for _____ sessions at \$20/session - - - \$

Make checks payable to: Montana Aglow