



Marriage Retreat Registration

Couple Information:

Name _____ Birth date _____

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

Primary Church _____

Payment Information:

Minimum nonrefundable deposit for each couple is \$100. Balance is due 30 days prior to retreat start date.

Total Retreat fee: _____

Deposit / this payment: _____

Balance due: _____

Mail registration form with your nonrefundable deposit to :

Sonrise Mountain Ranch
 PO Box 220
 Cimarron, CO 81220

P- (970) 249-5774, F-(970) 249-1668
 office@sonrisemountainranch.org

Retreat Choice:

_____ January 13-15, 2017

_____ February 24-26, 2017

Fees:

The cost is \$300 per couple. This fee covers the entire retreat from Friday dinner to Sunday brunch and includes a private cabin for each couple, all meals, and programmed activities.

We will send a confirmation of your registration. We look forward to seeing you!

SMR Office Use:
 Date Rec'd: _____ Confirmation Email Date: _____ 30 day letter Date: _____
 Notes: _____ Amount Paid: _____ Amount Due: _____