

**Shadow Rock UCC  
Profound Journey  
November 4 - 6,**



**Dialog  
2011**

## **REGISTRATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

Please share with us any dietary restrictions or accessibility concerns:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- PJD Covenant: I understand that my participation in each session of the weekend is vital to the group and my own personal experience.

Parents needing assistance arranging childcare are asked to call the church office.