

# VII Family Spiritist Retreat

"Peace begins in the family"

N<sup>o</sup>: \_\_\_\_\_

**Date:** July, 18<sup>th</sup> of 2010 **Location:** Old Mine Park, 121 Old Mine Road, Trumbull, CT, 06611 **Time:** From 9am to 4pm.

**Register by:** July 4<sup>th</sup> **Price\*:** 3 and under **free**; 4 to 12 **\$10.00**; 13 and older **\$15.00** – \*\* June, 1<sup>st</sup> onwards, add **\$5.00** per person

- Important:**
- All participants must wear the event promotional t-shirt. T-shirt's color will be determined by the participant's age group.
  - The retreat will be held on a public park with lots of trees, rocks, a lake and many walking trails. It is therefore recommended that all participants wear jeans, or short pants, tennis shoes, and bring sun block, and insect repellent.
  - The goal of this retreat is for families to get together to study and reflect on the topic of 'Forgiveness: Pathway to Peace' according to Spiritism. It is expected that participants' moral conduct is in accordance to the retreat's fraternal purposes.
  - Parents, or an adult designated by the parents, will be responsible for their children and may be requested to help keep the discipline in the retreat.
  - For check payments, please mail them to: AKSSMA PO Box 252 Somerville, MA 02145 - Attn: Bruno Drummond.

**Contacts:** Ângela (SER, CT) – (203) 648-2007 Eduardo (AKSC, NY) - (718) 729-3034 Nahur (AKSS, MA) - (857) 472-2922

**More info:** Visit our web site at <http://www.familyspiritistretreat.org> or e-mail us at [info@familyspiritistretreat.org](mailto:info@familyspiritistretreat.org)

**Receipt:** We received the amount of US\$ \_\_\_\_\_ ( \_\_\_\_\_ )  
from the family \_\_\_\_\_ for their registration in the VII Family Spiritist Retreat.

**Received by:** \_\_\_\_\_, \_\_\_\_\_ 2010

# VII Family Spiritist Retreat

N<sup>o</sup>:

Family's Last Name:			
First Name(s)	Lang.	Age(s)	T-Shirt Size(s)
1.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
2.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
3.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
4.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
5.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
6.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> En Es Pt	<input type="checkbox"/> till 3 <input type="checkbox"/> 4-6 <input type="checkbox"/> 7-9 <input type="checkbox"/> 10-12 <input type="checkbox"/> 13-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> adult <input type="checkbox"/> staff. Team:	Toddler Youth Adult <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
Please, tell us about your family's diet, medical treatment or any special care that we need to know:			
Contact Info			
City/State:		Email	Ph:
Spiritist Center			
Name:		City:	State:
Disclaimer			
The person(s) listed above will not hold the event organizers or the property owners liable for any type of accidents that might occur on the premises during the time of the VII Family Spiritist Retreat.			
(Please sign.) _____			
For Organizers' Use Only			
Name:		Date:	Paid: \$
Obs.:			