Sacred Heart Retreat House

Carmelite Sisters of the Most Sacred Heart of Los Angeles

920 East Alhambra Road • Alhambra, California 91801

(626) 289-1353 Ext. 204 Fax (626) 281-3546 www.sacredheartretreathouse.com

Don't miss this unique spiritual experience.
Invite family and friends to share a personal quiet time with God.

The weekend retreat begins at 5:00 p.m. on Friday and ends at 12:30 p.m. on Sunday
Reservation application and payment deadline is: **May 15, 2017**

For more information contact
Cathryn Wallace
1726 Lake Street
Huntington Beach, CA 92648
(714)969-0934
Email: lilcw@verizon.net
:

Women's Silent Retreat

June 9-11, 2017

Located in the beautiful and serene grounds of the

Sacred Heart Retreat House Alhambra

Retreat Master
Rev. David Kueter, O.M.V.

Theme
"Streams of Grace and Mercy"

Please make your check payable to:
Sacred Heart Retreat House

Please return reservation form and payment to:

Cathryn Wallace

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Accommodations and Rates – June 9-11, 2017 (All meals included)

Private room with private bathroom . . . . . $ 285 _____

Semi-Private room with shared bathroom between two rooms . . . . . $ 260 _____

Private suite three separate rooms share one bathroom . . . . . $ 225 _____

Double two single beds in room with bathroom . . . . . $ 180 _____

Commuter for weekend – attends entire retreat, but does not spend the night. Includes all meals . . . . . $ 140 _____

Commuter for Saturday only. Includes all meals . . . . . $ 75 _____

Sub-Total: $_____

☐ I would like to donate to the Sacred Heart Retreat House Scholarship Fund to help others attend retreats . . . . . Amount: $_____

Final Total : $_____

Name _____ My Email _____

Address _____ City/State/Zip _____

Phone: Home _____ Cell _____ I prefer to be contacted by: ☐ Home Phone ☐ Cell ☐ Email

Emergency Contact _____ Phone _____ My Parish _____

Have you made a retreat here before? ☐Yes ☐No Can you have an upstairs room? ☐Yes ☐No

Do you have any medical needs? * ☐Yes ☐No Do you have dietary restrictions or needs? * ☐Yes ☐No

*Please specify: _____

ROUND TRIP TRANSPORTATION (leaves from SVDP Church @ 1:30) Bus fees additional $26/round Trip –

NOTE: Limited space on the bus-accommodations for 56 passengers SEPARATE CHECK PAYABLE TO: St Vincent de Paul Church

PAYMENT :

- Checks must be made payable to: Sacred Heart Retreat House
- For credit card payments: Please note that we only accept Master Card and Visa Card
- Your signature is required in order to process credit card payments (below). Thank you.

Credit Card Authorization Type: ☐MasterCard ☐Visa

Credit Card Number: _____ Expiration date: _____

Name on card: _____ Amount authorized: $ _____

Signature: _____ Date: _____

Please Note

Photography and Publications

At some retreats there may be photography, filming, videotaping and/or audio recording or other means of capturing your image or voice and/or being quoted in the media or printed materials (including social media websites) for the Sacred Heart Retreat House.

FOR SACRED HEART RETREAT HOUSE USE:

Amt. Paid $_____ Paid by: _____ Entered: _____ Confirmation Sent: _____