

Prayer & Action 2018 Weekend Retreat



WHERE: St. Isidore's Catholic Student Center— Manhattan, KS

WHEN: Friday, April 13—Sunday, April 15

Name: _____
Address: _____

Cell Phone: _____
Email: _____

***Please fill out the medical form and return it with your registration fee of \$20 by Friday, April 6th. Make out checks to St. Isidore's Catholic Student Center.**



PER PERSON FEE: \$20
PLEASE RETURN FORMS AND FEE TO:
THE MAIN OFFICE
711 DENISON AVE
MANHATTAN, KS 66502

