

OCTOBER 2018

# Watermark Community Church RETREAT

Join us for an incredible time of strengthening relationships and taking the next step in discipleship in Sai Kung.

**Dates** Oct 12 (Fri) - 14 (Sun)  
2 nights (Fri & Sat) or 1 night (Sat check-in)

**Price** Deposit of \$200/person must accompany each registration (non-refundable). Balance is due by 9 September. Prices include all meals on Sat & Sun, on-camp activities and shuttle service. Rates are fixed regardless of check-in time. Kids 2-11 yrs old get a special rate. <2 yrs are free of charge.

**Early Bird Deadline : 31 May 2018**

	1 Night	1 Night (kid)	2 Nights	2 Nights (kid)
Early Bird	\$350	\$200	\$600	\$450
Late Register	\$450	\$300	\$700	\$550

### Living Arrangements

- shared dorm rooms (gender specific) or family rooms for smaller families (assigned based on priority and need)
- no option for non-overnight stay



**Location:** Sai Kung Outdoor Training Camp

**QUESTIONS?**



Contact Cherry at [ministrysupport@watermarkchurch.hk](mailto:ministrysupport@watermarkchurch.hk) / 2857 6160

**WATERMARK  
COMMUNITY CHURCH**

# REGISTRATION FORM

Please complete and place inside an envelope along with your deposit to register. Drop off in an offering box or mail into the church office: 5/F, 6 Wilmer St, Sai Ying Pun, HK

Last Name _____  First Name _____  Phone _____ Email _____  <input type="checkbox"/> 1 Night <input type="checkbox"/> 2 Nights  Diet/Allergies <input type="checkbox"/> Gluten free <input type="checkbox"/> Vegetarian <input type="checkbox"/> Other _____	<b>Spouse:</b> Last Name _____  First Name _____  Phone _____ Email _____  <input type="checkbox"/> 1 Night <input type="checkbox"/> 2 Nights  Diet/Allergies <input type="checkbox"/> Gluten free <input type="checkbox"/> Vegetarian <input type="checkbox"/> Other _____
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*Note: University students sign up via a different form at a different time; details via ICF.*

<b>Household: # of Kids:</b> _____ (2-11 yrs old)  <b># of Toddlers:</b> _____ (<2 yrs)	Names _____ (indicate special diet/ needs & # nights) _____ _____
<b>Youth (adult price)</b> <input type="checkbox"/> Separate Registration	Last Name _____ First Name _____  Diet/Needs: <input type="checkbox"/> 1 Night <input type="checkbox"/> 2 Nights _____

<b>\$ Enclosed</b> _____ (\$200/person non-refundable deposit)	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque # _____ (no direct transfers)	Office Use Date Received:
<b>Balance</b> _____ (to be paid by 9 Sep 18)		
Bless Others! \$ _____		

<b>Need Shuttle</b> (write # of people)  <b>Going</b> ___ (Fri) 18:30 ___ (Sat) 12:30  <b>Return</b> ___ (Sun) 13:15	<b>Preferred Location</b> <input type="checkbox"/> Central <input type="checkbox"/> TST  <input type="checkbox"/> Archery <input type="checkbox"/> Rock Climbing <input type="checkbox"/> Swimming
<b>Interested Activities</b> <input type="checkbox"/> Hiking <input type="checkbox"/> Abseiling (poll; no guarantees!) <input type="checkbox"/> Team-building	

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