



2015 LADIES RETREAT SEPTEMBER 17-19 AND SEPTEMBER 25-27

Need a break? A refresh? If so, you won't want to miss the 2015 Ladies Retreat! We anticipate God will do a mighty work in your heart and life – we trust you will be blessed and encouraged! We hope you will join us for this special weekend of learning, worship, and fellowship!

Option 1 – September 17-19

Option 2 – September 25-27 (Friday-Sunday)

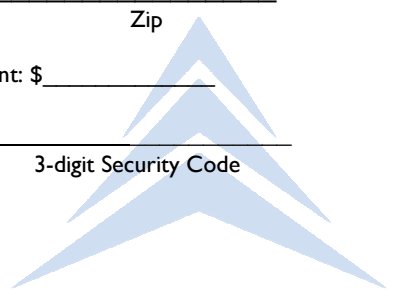
Speaker: Peggy Walker
Cost: \$135
(\$40 deposit required with registration)

Speaker: Rachel Inouye
Cost: \$135
(\$40 deposit required with registration)

REGISTER ONLINE
WWW.LAKEANNCAMP.COM

WOMEN ONLY. NO CHILDREN OR INFANTS PLEASE.

| | | | | | |
|--|--|---------------------------------------|-------------------------------------|-----------------------------------|------------------|
| Name _____ | | Home Phone _____ | | Cell Phone _____ | |
| Email Address _____ | | Church Name _____ | | Church City _____ | |
| Address _____ | | City _____ | | State _____ Zip _____ | |
| Method of Payment: <input type="checkbox"/> Check | | <input type="checkbox"/> Visa | <input type="checkbox"/> MasterCard | <input type="checkbox"/> Discover | Amount: \$ _____ |
| Credit Card # _____ | | Expiration Date _____ / _____ / _____ | | 3-digit Security Code _____ | |
| Signature _____ | | | | | |
| Office Use Only: Date Rcv'd: _____ Payment Amount: _____ Initial: _____ | | | | | |



BETH MOORE SIMULCAST SEPTEMBER 11-12, 2015

\$65 Includes: Friday lunch and dinner, breakfast and lunch on Saturday, and Simulcast. (Friday afternoon activities include: Zip Line, 5K Walk, The Leap, and Red Canoe)
***Registration will be from 11 a.m.-1 p.m.**

\$55 Includes: Friday night dinner and events, lunch on Saturday and Simulcast. (Does not include housing Friday night).
***Registration will be from 4:30p.m.-5:30p.m. Dinner is at 5:30p.m.**

\$25 Includes: Simulcast and lunch on Saturday.
***Registration will be from 8:30a.m.-10a.m.**

REGISTER ONLINE
WWW.LAKEANNCAMP.COM

WOMEN ONLY. NO CHILDREN OR INFANTS PLEASE.

| | | | | | |
|--|--|---------------------------------------|-------------------------------------|-----------------------------------|------------------|
| Name _____ | | Home Phone _____ | | Cell Phone _____ | |
| Email Address _____ | | Church Name _____ | | Church City _____ | |
| Address _____ | | City _____ | | State _____ Zip _____ | |
| Method of Payment: <input type="checkbox"/> Check | | <input type="checkbox"/> Visa | <input type="checkbox"/> MasterCard | <input type="checkbox"/> Discover | Amount: \$ _____ |
| Credit Card # _____ | | Expiration Date _____ / _____ / _____ | | 3-digit Security Code _____ | |
| Signature _____ | | | | | |
| Office Use Only: Date Rcv'd: _____ Payment Amount: _____ Initial: _____ | | | | | |

