

# St. Joseph by the Sea Registration Form

Deposit Paid
Check #
Date of Payment

Please register me for		
<i>(Title of Program)</i>		
Date of Program		
If registering for retreat, please indicate <b>PRIVATE 0 DIRECTED 0</b>		
Name		
Address		
City	State	Zip
Home Phone ( )	Work ( )	Cell ( )
EMAIL		

\* \* \* \* \*

Enclosed is my non-refundable \$50 deposit ( ).  
 Please make checks payable to St. Joseph by the Sea  
 Mail registration and deposit to St. Joseph by the Sea \* 400 Route 35 North \* South Mantoloking, NJ 08738

REFUND POLICY: If a 48 hour notice is given and a replacement is available, a complete refund of the deposit is made. Otherwise, the \$50 deposit is retained and is non-transferable.  
*Your Cancelled Check is your Receipt*

Optional Service: Care Through Touch Ministry Is offered by Sr. Rosemarie Sommers, MSC throughout the year.  
 Call the office for more information.