



# Christian Church in Ohio

D I S C I P L E S O F C H R I S T

*A covenant network of congregations in mission:*

*We are the Body of Christ gifted and called in covenant together as Disciples of Christ to be centers of transformation on the new mission frontier of our own communities*

## Get Personal With Each Other! Diving into Personal Relationships



**Advance Ministry Winter Retreat | January 1-3, 2010 | Monroe Lodge - Camp Christian**

Fees for the event are:

\$80 for early registration (by Nov. 15<sup>th</sup>)\*

\$90 for regular registration (Nov. 16<sup>th</sup> to Dec. 25<sup>th</sup>)\*

\$100 for Late and Onsite registration (Dec. 26<sup>th</sup> – Jan. 1<sup>st</sup>)\*

\$50 for SATURDAY ONLY (Meals Included, NO LODGING)

(\*Fees, except Saturday Only, include event registration, meals, and lodging.)

Registration begins at 7:00 p.m. on Friday and end on Sunday after worship. Please bring the following items with you: Bedding or sleeping bag and pillow, towels and other toiletries, Bible and notebook.

Register online at [register.advanceministry.org](http://register.advanceministry.org) or mail this form along with your payment to:

Christian Church In Ohio  
355 East Campus View Blvd. Suite 110  
Columbus, Ohio 43235

Make Checks payable to:  
**Christian Church In Ohio**

*\*CCIO's refund policy applies to this event.*

Questions? Contact the Advance Ministry Officers at [officers@advanceministry.org](mailto:officers@advanceministry.org)

### Advance Ministry Winter Retreat January 1-3, 2010

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Church: \_\_\_\_\_ Member?: Y / N

Dietary Needs: \_\_\_\_\_

Please Circle All Dates Attending 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup>

Scholarship Assistance Needed?: Y / N

\*An additional form will need to be filled out for scholarship assistance.

\_\_\_\_\_ I cannot attend but would like to contribute to the Advance Conference scholarship fund.

OFFICE USE ONLY
DATE _____
CHECK # _____
AMT _____