

SOLO FLIGHT XX REGISTRATION, September 3-6, 2010

Please return this form with a non-refundable deposit of \$50 per person to: (Deposit is deducted from balance due.) Mail to **Solo Flight Registration, 150 Morgan Street, Versailles, KY 40383** Make checks payable to Solo Flight.

Balance due Friday, August 13. Registrations after that date should be sent with the full amount due. Cost: \$500 per person (double occupancy lodging, meals, program, use of recreational facilities). Single occupancy: \$550 (based on availability). Commuters: \$200 (does not include meals at Roslyn).

Name _____

Address _____

City, State, ZIP _____

(Please include the Rev., Dr., Mr., Mrs., Ms., Miss)

Male _____ Female _____ 1st time at Solo Flight _____ Age 25-34 _____ 34-44
_____ 45-54 _____ 55-64 _____ 65+ _____

E-mail Address _____

Always single _____ Divorced _____ Widowed _____ Separated _____ Other _____

Daytime phone number with Area Code _____

Roommate requested * _____

Check here to request a single** _____

Name of Local Church _____

Diocese _____

Want to attend this conference for: Personal / spiritual growth _____ Singles' Ministry Leadership Training _____ Other _____

Payment by Check _____ (payable to Solo Flight). _____ Payment by Pal Pal

Amount enclosed \$ _____ Deposit \$ _____ In full \$ _____

** Single occupancy based upon availability, which may not be determined until check-in.

***Smoking is allowed only outdoors.

Description of Housing: For a description: [www. http://www.roslyncenter.org/accom.shtml](http://www.roslyncenter.org/accom.shtml)

Meals: Buffet service for all meals. Commuters must eat at least one meal at Roslyn.

Special Needs: Please inform in writing, before your arrival, of special medical needs such as diet and disability accommodations.

E-mail inquiries to Kay Collier McLaughlin - KCollierM@diolex.org or David Perkins - davidwperk@aol.com