



# **ACTS Missions St. Louis Chapter RETREAT Workshop** **Registration Form**

Date: Saturday, October 5, 2019

**Location**

**St Paul Catholic Church**  
15 Forest Knoll Dr  
Fenton, MO 63026-3105

The Workshop will begin promptly at 8:15am in the Church Basement concluding at 3:30pm

Registration begins at 7:30am

**All participants will receive the 2019 Revised Retreat Manual**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parish Name: \_\_\_\_\_

Month/Year you were a retreatant on your ACTS retreat: \_\_\_\_\_

Reason for Attending/Role:

\_\_\_\_\_ Director      \_\_\_\_\_ Co-Director      \_\_\_\_\_ Spiritual Director/Companion  
\_\_\_\_\_ Team Member      \_\_\_\_\_ Core Member      \_\_\_\_\_ Just want to learn more

**Registration fee of \$35 per person includes lunch.**

Please make checks payable to *ACTS Missions St. Louis Chapter*

Mail this registration form with payment to:

Dennis Moeller  
6976 Hi View Ave  
St. Louis MO 63109

If you have any questions regarding this workshop, please contact:

Dennis Moeller, 314-780-0436, [ddesrm@charter.net](mailto:ddesrm@charter.net)  
Peggy Baker, 314-323-5694, [mkpabaker@aol.com](mailto:mkpabaker@aol.com)

Note: When your registration form & payment, we will send a confirmation e-mail.