



Church Sponsorship for Family Groups

Church Name _____

Phone _____ Email _____

Address _____

Retreat Dates _____ Family Name _____

Pastor's name and email _____

Church Support

We at _____ fully support _____
(Church Name) (Family name)

and recommend them as fitting to SGICR's beliefs, missions and purpose. _____ (Yes, No)

Pastoral recommendation

I, _____, Pastor of _____

acknowledge the _____ family as one who can benefit much from a time of rest and renewal at SGICR. Their together time as a family is necessary and will in turn strengthen our church family in growth. _____ (Yes, No)

Comments
