



## Church Groups Booking Request

Church Name \_\_\_\_\_

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

Address \_\_\_\_\_

\_\_\_\_\_

Retreat Dates \_\_\_\_\_

Group Type (Men/Women/Youth/Children/Family) \_\_\_\_\_

Group Size \_\_\_\_\_

I have read, understand and agree to SGICR Terms and conditions \_\_\_\_\_ (Yes/No)

Special Conditions (Special needs, Unique medical conditions, Request of early check-in or extended check-out)

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