

AUTISM FAMILY RETREAT

JUMONVILLE

AUTISMINITIATIVE.COM

SEPTEMBER 22-24, 2017

RETREAT VISION

To create a weekend retreat that will allow families of children living with autism to enjoy a mountaintop experience that will combine coveted parental free time with an opportunity for quality family time.

We will provide hope through time for worship, rest, and relaxation in a safe Christian setting capable of caring for children with Autism.

ALL AGES ARE WELCOME

INFORMATION

DATE: September 22-24, 2017

*COST: \$120 per adult
\$60 per child (3-11yrs)
checks payable to
Autism Initiative*

*\$50 Deposit (per family)
Balance due upon Check-in*

*REGISTRATION DEADLINE:
September 15, 2017*

*TIME: Check-in Friday @ 6pm
Check-out Sunday @ 2pm*

*PLACE: Jumonville
887 Jumonville Rd
Hopwood, Pa. 15445*



Attendance at Retreat grants permission for publication of images.



Retreat Leader: Rev. Ed Saxman

*Office: 724-458-8660
Cell: 814-657-6722*

*Email:
autisminitiative@yahoo.com*

Send Registration to:

**Autism Family Retreat
c/o Jumonville
887 Jumonville Rd
Hopwood, Pa. 15445**

Hope

Hope...It's magic and it's free, it gives us a place to be, it sparkles in our tears and dissipates our fears. It's reaching past today, and trying a new way. It's pounding on the doors and always seeking more. It whispers of a cure or of remedies unsure, and most of all to share hope makes us all whole.

AUTISM FAMILY RETREAT REGISTRATION

FAMILY NAME: _____ No. Attending _____

NAME:	AUSTISM	SEX	AGE	COST
1. _____	Y N	_____	_____	_____
2. _____	Y N	_____	_____	_____
3. _____	Y N	_____	_____	_____
4. _____	Y N	_____	_____	_____
5. _____	Y N	_____	_____	_____

TOTAL COST: _____

TOTAL DEPOSIT (\$50 per family): _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

Attendance grants permission to use digital images taken during the Retreat for promotional purposes.