

Registration for Overnight Lodging at

The Sanctuary

921 W. Main Street – Whitewater, WI 53190
Telephone: (262)473-7472 Fax: (262)473-9724

Please call for available accommodations before remitting this form.

Name _____ Date _____
Address _____ Phone _____
City/State _____ Zip _____
E-mail _____

Mon. - Thur. \$75.00 (per night, Single)

Fri. - Sun. \$85.00 (per night, Single)

Mon. – Thur. \$100.00 (per night, Couple)

Fri. – Sun. \$110.00 (per night, Couple)

Date of Arrival: _____ Time of Arrival: _____

Date of Departure: _____ Time of Departure: _____

Amount for Stay: \$ _____ Donation: \$ _____ Total: _____

Amount Enclosed/Prepaid: \$ _____ Purpose of Stay: _____

DEPOSITS ARE NOT REFUNDABLE

If you must cancel your stay and have paid the deposit, this deposit may be **APPLICABLE** for another stay within three months-- **ONLY** if you call before the day of your scheduled arrival.

Write a brief paragraph below regarding your ministry, and/or your relationship with the Lord and/or your church affiliation. (Use back of sheet if necessary.)

Also briefly describe what you hope will be the results of your stay at The Sanctuary. That is, what are you expecting the Lord to do for you or what are you asking of God?