

**REGISTRATION FORM**  
**LCWR Region 9 – Fall Meeting**  
**October 16-18, 2023**  
Siena Retreat Center  
5637 Erie Street  
Racine, Wisconsin 53402-1900  
262-898-2590

**Participants are required to be fully vaccinated and boosted.**  
**Wearing of masks on-site will be clarified closer to the event.**

NAME: \_\_\_\_\_ COMMUNITY INITIALS \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

NAME for nametag \_\_\_\_\_

Is this your last meeting (going out of office)? \_\_\_\_yes \_\_\_\_no

Is this your first meeting? \_\_\_\_yes \_\_\_\_no

**ACCOMMODATIONS** (NOTE: Lunch will not be provided on Oct 16 or 18)

Please choose either "A" or "B".

\_\_\_\_ A. I will be present for the entire meeting (5 meals; two overnights). TOTAL: \$ 300

*OR*

\_\_\_\_ B. I will be present for a portion of the meeting.

I will NOT be present for these meals:

____ Monday, Oct 16	Evening Meal
____ Tuesday, Oct 17	Breakfast
____ Tuesday, Oct 17	Noon Meal
____ Tuesday, Oct 17	Evening Festive Meal
____ Wednesday, Oct 18	Breakfast

*Please deduct \$13.00 from \$300 for each meal to be missed.*

I will NOT need lodging for this night:

\_\_\_\_ Monday, Oct 16      \_\_\_\_ Tuesday, Oct 17

*Please deduct \$85.00 from \$300 for each overnight to be missed.*

Indicate any special dietary needs: \_\_\_\_\_

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TOTAL for Accommodations and meals \$ \_\_\_\_\_

(One check may be written for Annual Membership [\$35] plus Accommodations and meals.)

Make checks payable to LCWR-9 and send with completed form to:

Sister Rose Jochmann, OSF  
3110 Nicolet Drive  
Green Bay, WI 54311-7212

Email: [sr.rose@gbfranciscans.org](mailto:sr.rose@gbfranciscans.org)

**REGISTRATION DEADLINE: POSTMARK OR EMAIL NO LATER THAN SEPTEMBER 25, 2023**