

Sullivant Retreat Center

PLEASE LEAVE THIS SHEET ON KITCHEN TABLE

BUILDING USED: *HOMESTEAD*

ORGANIZATION: _____

DATE TO BE USED: _____

GROUP COORDINATOR: _____

HM PHONE: _____ WK PHONE: _____

ORGANIZATION ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

NAMES OF PERSONS IN ATTENDANCE:

1. _____ 13. _____

2. _____ 14. _____

3. _____ 15. _____

4. _____ 16. _____

5. _____ 17. _____

6. _____ 18. _____

7. _____ 19. _____

8. _____ 20. _____

9. _____ 21. _____

10. _____ 22. _____

11. _____ 23. _____

12. _____ 24. _____

How many attended meeting only and did not spend the night? _____

PLEASE MAKE CHECKS PAYABLE TO:

MAIL TO:

QUESTIONS:

SULLIVANT RETREAT CENTER

P.O. BOX 2100

NORMAN, OK 73070

(405) 329-2990