

Journey Toward Wholeness 2015-2016 Application Form

Journey Toward Wholeness is designed for those who are looking for spiritual enrichment and growth. This happens in three ways:

- Through a regular schedule of enrichment throughout the year.
- Through the small community of fellow learners.
- Through the presentations and spiritual practices you will experience.

All information provided in the following application will be held in confidence.

Email your completed application to aquanrud@fspa.org or mail to Audrey Quanrud, Franciscan Spirituality Center, 920 Market St., La Crosse, WI 54601. Please include a \$50 nonrefundable deposit (made payable to Franciscan Spirituality Center) to hold your place. It will be applied to the program fee.

Journey Toward Wholeness Application

| Email | |
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| | |
| Phone (evening) | |
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| igious Affiliation (if any) | |
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1. What are your goals for Journey Toward Wholeness?

| 2. | Describe your current spiritual practices (if any); for example, daily prayer, meditation, spiritual journaling, Bible study, spiritual direction, etc. |
|----|---|
| 3. | Please provide a brief autobiographical sketch that describes your family life, your faith or spiritual life, and some of your significant life experiences. Please include anything else you |
| | would like us to know about you. |
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Program Fee

| We invite you to stay in a guest bedroom at the Franciscan Spirituality Center for a full retreat experience; however, we do offer a commuter option. Please indicate your preference below. | | | | | |
|---|-------------|-----------------|--|--|--|
| ☐ Full: \$750 includes bedroom, four weekend sessions and all meals. | | | | | |
| ☐ Commuter: \$500 includes four weekend sessions and all meals. | | | | | |
| Installments You may pay in full at the beginning of the year, or you may pay in installments. The initial deposit of \$50 to hold your place is due by August 1, 2015 and is applied toward the program | | | | | |
| fee. The amounts and due dates for the remaining balance is as follows: | | | | | |
| | <u>Full</u> | <u>Commuter</u> | | | |
| September 1, 2015 | \$175 | \$125 | | | |
| November 1, 2015 | \$175 | \$125 | | | |
| January 1, 2016 | \$175 | \$100 | | | |
| March 1, 2016 | \$175 | \$100 | | | |
| | | | | | |
| Please indicate your payment preference: | | | | | |
| □ Payment in full by September 1, 2015 | | | | | |
| □ Payment in installments | | | | | |
| Financial Assistance | | | | | |
| Please indicate below if you would like to learn more about financial assistance to attend this program. We will call you to discuss options and answer any questions you may have. | | | | | |
| Financial assistance is available for part of the program fee. We are unable to provide financial assistance for the bedroom cost of the program. | | | | | |
| ☐ I am interested in receiving financial assistance and would like to be contacted. | | | | | |
| Phone number | | | | | |
| Best time to call | | | | | |
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Date

Signature