



# Ladies Retreat a Recipe for Life

Bill Rice Ranch

**October 14-16, 2010**

**Guest Speaker: Bobbi Cook, Evangelist Wife**

**Host Speakers: Wil & Sena Rice and Mary Rice**

**Cost: \$80**  
Includes \$10 registration fee, five meals, and lodging.

**Registration:** The retreat opens Thursday with registration from 1-4 P.M. Activities begin with dinner at 6 P.M. The retreat ends Saturday before noon. Early reservation dates assure you a place in this retreat. For directions to the Ranch, visit our website: [www.billriceranch.org](http://www.billriceranch.org)

**What to bring:** Ladies bring skirts, dresses, or culottes/divided skirts of proper length (knee-length) and fullness. No shorts, slacks, or capris please. No children, No smoking and No pets, please!

**Craft Tables:** If you are interested in selling crafts at our Country Fair, please indicate below how many tables you would like to reserve. Cost is \$5 per table and may be paid upon arrival. Make table reservations early as space is limited!

**Other information:** All rooms are heated and air-conditioned. For standard rooms, rental linens are available; or you may bring your own sleeping bag or blanket, sheets, pillows, etc. A limited number of deluxe rooms are available on a first-come-first-served basis. The deluxe room cost is an additional \$50 per night per room. Call for details.

**Registration Form** Please enclose registration fee (\$10). **Note: Registration fees are non-refundable. Questions? Call: 1-800-253-RICE, ext. 125**  
Mail to: **Bill Rice Ranch** 627 Bill Rice Ranch Road, Murfreesboro, TN 37128 Visit our website: [www.billriceranch.org](http://www.billriceranch.org) for more details and other exciting events!



**Please keep upper portion for your reference!**

Please print and complete all sections with **camper** information.

(Circle One)

Mrs. Miss \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Name of Church Group \_\_\_\_\_

City/State \_\_\_\_\_

I agree to abide by all camp rules and will assume full responsibility for my physical welfare and will not hold the Bill Rice Ranch liable in case of sickness or accident.

Camper's Signature \_\_\_\_\_ Date \_\_\_\_\_

## Ladies Retreat - 2010

### Office Use Only

Fees \_\_\_\_\_ Bal. \_\_\_\_\_

Date \_\_\_\_\_ ID# \_\_\_\_\_

Please  all that apply:

Group Leader  Adult  Teen

### Lodging:

Standard  Deluxe

Reserve a table for **Craft Fair** - \$5 per table

Number of tables needed \_\_\_\_\_  
(space is limited - get your reservation in early!)

## Medical & Insurance Info

Personal or church insurance will be primary, and the Bill Rice Ranch will provide excess coverage.

Insurance Company: \_\_\_\_\_

Group & Policy Numbers: \_\_\_\_\_

Name of Policy Holder: \_\_\_\_\_

I am not covered by insurance.

**Please check the appropriate box/boxes:** (This will be kept confidential)

Diabetes/Hypoglycemia (sugar problems)

Heart condition/problems

Epilepsy

Environmental Allergies

Problems with heat

Drug Allergies, please list: \_\_\_\_\_

Thyroid problems

Lupus

High blood pressure

Asthma

Food Allergies, please list: \_\_\_\_\_

If camper has ever had allergic reaction requiring

EMERGENCY action, please explain: \_\_\_\_\_

Other, please list: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Medications taken on a regular basis, please list name of

medicine and dose: \_\_\_\_\_

NOTE: Anyone requiring special dietary foods **MUST** bring their own foodstuffs if a supplement beyond regular meal is required.