

Ecclesia Ministries *common cathedral*
CITYREACH (all sessions 9th Grade through Adult)
Academic Year 2011-12

Name of School, Church or Organization

Group Leader and Back-Up Contact

Address / City / State / Zip

E-Mail

Telephone #/Cell

Names of Participants, including adults (use additional sheet if necessary):

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Total number of youth and adults _____ x \$60 = _____ enclosed

Please make checks payable to Ecclesia Ministries and mail with this form to the address below
at least 30 days before your session to secure your spaces for CityReach.

The first 100 registrations will be accepted.

Others will be placed on a waiting list or asked to consider another session.

[OVER]

PO Box 51003, Boston, MA 02205
PHONE: 617-247-4927
info@ecclesia-ministries.org

