



Personal Retreat Request - Individual/Couple/Family

Buffalo Ridge Hospitality & Retreat Center



Please contact our office for available retreat dates before submitting a retreat request form. Please fill out the following and return to the address on the back. This will help us understand your expectations and know how we can best serve you. Filling out this form does not guarantee a reservation until confirmed by our office.

Name _____

Address _____

City, State, Zip _____

Telephone Number _____

E-mail _____

Church/Mission Affiliation: _____

How did you hear about Buffalo Ridge? _____

Retreat Information:

Date(s) of retreat: _____ to _____

Approx. Arrival Time: _____ Approx. Departure Time: _____

How many vehicles will you be bringing? _____

Please let us know how many guests need overnight facilities:

_____ Women • _____ Men • _____ Couple(s) • _____ Family with _____ children → (_____ girls _____ boys)

Age of children: _____

Meals	Counseling
We provide groceries for you to prepare your own breakfast and lunch according to your schedule. Would you like to join one of our staff couples for an evening meal ? <input type="checkbox"/> Yes <input type="checkbox"/> No thank you	We have qualified counseling staff. Would you like to set aside any time for personal discussion or counseling? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Are there any medical conditions or special diets we should be aware of?

