

COST INFORMATION:

**FIVE MEALS: 2 BREAKFASTS,
1 LUNCH, 2 SUPPERS
DORM/LODGE FOR 2 NIGHTS.**

PLEASE CHOOSE ONE

() LOWER DORM () UPPER DORM

() LODGE

REGULAR COST BEFORE OCTOBER 5

CHARGE: \$155 -- DORM

CHARGE. \$190 – LODGE

LATE FEE: \$10 OCTOBER 5-11

CHARGE: \$165 – DORM

CHARGE: \$200 – LODGE

FOLLOW POSTMARK DATE

REGISTRATION CLOSE: OCT 12-18

NO REG AT DOOR: OCTOBER 19

CANCELLATION:

\$50.00 NON-REFUNDABLE FEE

MAKE PAYABLE TO *WCDMR*

BRUCE BREWSTER
621 JUNIPER WAY
LA HABRA, CA 90631

VP (714) 503-0685

TEXT (714) 924-5140



REGISTRATION INFORMATION:

Registration Deadline

Before October 5

Must Register Online First

Granite Ridge Christian Camp

www.graniteridgechristiancamp.com

1. Registration
2. (a) Names (b) Email
(c) Password
3. 2018 Rental Groups
4. West Coast Deaf Men
5. Rest of Information

TENTATIVE SCHEDULE:

FRIDAY, OCTOBER 19

3:00 - 5:00 PM	REGISTRATION
6:00 PM	SUPPER
7:00 PM	FELLOWSHIP
9:00 PM	SNACK

SATURDAY, OCTOBER 20

8:00 AM	BREAKFAST
9:15 - 11:45 AM	SESSION PHOTO
12:00 PM	LUNCH
2:00 - 5:30 PM	FREE TIME
6:00 PM	SUPPER
7:00 PM	SESSION

SUNDAY, OCTOBER 21

8:00 AM	BREAKFAST
9:00 AM	EMPTY ROOMS
10:00 AM	SESSION

22ND WEST COAST



DEAF MEN'S RETREAT



Mission Goes...

With Evangelism!

OCTOBER 19-21, 2018



**4850 Coyote Creek Lane
Creston, Ca 93432**

BIOGRAPHY OF CHRISTOPHER HUGHES



Pastor Christopher Hughes has been pastoring Deaf Calvary Church in

Frederick, Maryland for 15 years.

He has traveled to more than 25 countries preaching and teaching among the Deaf in those countries.

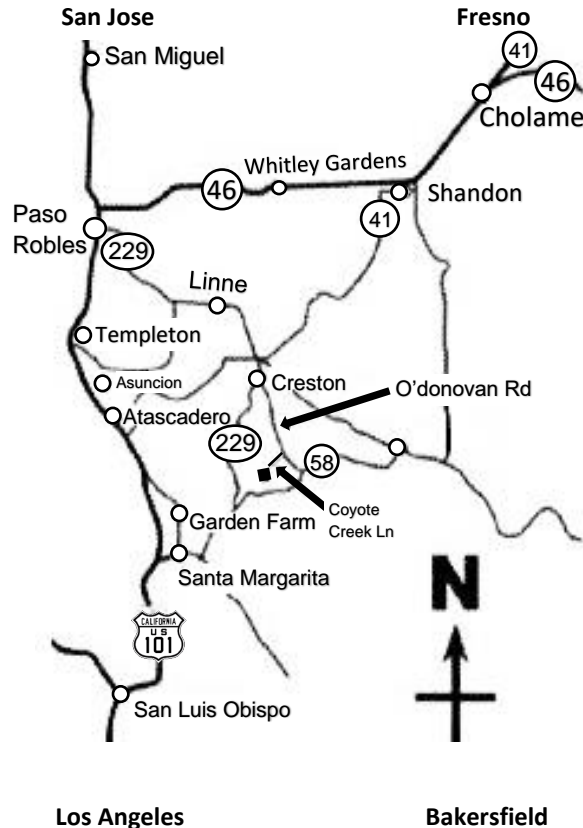
He has been married for 27 years to Jennifer Hughes and they have 4 children, 2 of which are married.

They also have 5 granddaughters.

He tries to live out his church's vision statement, which is:

We will be a church of influence... bringing the Good News of His Light and Love to the Deaf Community in our Cities, Country and Nations for His Glory.

HOW TO REACH



CONTACT:

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efern777@aol.com

Bruce Brewster
BedmondB@gmail.com

REGISTRATION:

**PLEASE NOTE:
THOSE WHO ARE 16-17 YRS OLD
MUST BE WITH FATHER OR
GUARDIAN!!!**

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

VIDEO PHONE (____) _____ - _____

E-MAIL ADDRESS _____ @ _____

FIRST TIME MEN'S RETREAT?
CIRCLE YES NO

BIRTH YEAR _____

Physical Problem for Dorm/Lodge

NAME OF THE PERSON CONTACTED
IN CASE OF EMERGENCY.

PLEASE PRINT

NAME _____

VIDEO PHONE/VOICE _____

RELATIONSHIP TO YOU _____

READ MORE INFO ON BACK