

# The Priory Retreat House

*Sr. Constance Messitt, CSJ, Director*

(518) 494-3733 Chestertown, NY 12817 [renew@prioryretreathouse.org](mailto:renew@prioryretreathouse.org)

## Priory Retreat House Registration Form

Name of Event or Program: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Registrant Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Town/City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

(we do not share/distribute/sell our email list with anyone)

Overnight Accommodations: Yes  No  Number of Nights: \_\_\_\_\_

Dietary Restrictions: Yes  No

If yes, please describe: \_\_\_\_\_

Please print and mail a copy of this registration form with a deposit of \$20 to:

**Priory Retreat House,**  
**135 Priory Road, PO Box 336, Chestertown, NY 12817**

Check is made payable to: **Priory Retreat House**

A confirmation will be sent upon receipt of this form

Questions? Please call 518-494-3733 or email us at [renew@prioryretreathouse.org](mailto:renew@prioryretreathouse.org)

Thank you, we look forward to seeing you!

*Sr. Connie Messitt, CSJ, Director*