

Hope and Renewal Marriage Ministry

2026 Marriage Retreat – Registration Form

Participant Information

Date: _____

Husband's Name: _____

Wife's Name: _____

Home Address: _____

City: _____ State: _____ ZIP: _____

Husband's Phone: _____ (Text OK? Yes No)

Wife's Phone: _____ (Text OK? Yes No)

Email (shared or individual): _____

Emergency Contact

Name: _____ Phone: _____

Relationship: _____

Health & Dietary Needs

Do you have any dietary restrictions or health concerns?

No Yes – Please specify: _____

Marriage Information

How long have you been married? _____

Which statement best describes the current state of your marriage? *Each spouse should check only one.*
(This information is confidential and will only be shared with retreat leaders.)

Husband	Wife	Description
<input type="checkbox"/>	<input type="checkbox"/>	1. Never been better!
<input type="checkbox"/>	<input type="checkbox"/>	2. Pretty good, but we could use some fresh ideas.
<input type="checkbox"/>	<input type="checkbox"/>	3. We have ups and downs and need to work on several areas.
<input type="checkbox"/>	<input type="checkbox"/>	4. Relationship is going downhill; we need to make changes.
<input type="checkbox"/>	<input type="checkbox"/>	5. We're struggling to hold it together.

Scholarship Eligibility

Do you qualify for the **Illinois Free Will Baptist Scholarship**?

Yes No Not Sure Your church's name & location: _____

The Christian Education Board of the Illinois State Association of Free Will Baptists provides \$100 scholarships to participants from Free Will Baptist churches in Illinois. This reduces the final cost to **\$250 (or \$200 if registered by Dec. 1).*

Payment Information

Payment may be made with cash, check, or credit card (online). Make checks payable, mail to—

JCity Center for Hope and Renewal

504 E. Broadway Blvd.
Johnston City, IL 62951

Pay online at:
<https://jcity.center/marriage/retreat>



Please indicate the amount of payment submitted with this application:

- \$50 Early Bird Deposit (paid by 12/1/25)
- \$100 Regular Deposit (paid 12/1/25— 2/26/26)
- \$200 Full Early Bird Registration *with ILFWB Scholarship* (before 12/1/25)
- \$250 Full Regular Registration *with ILFWB Scholarship* (after 12/1/25)
- \$300 Full Early Bird Registration (no scholarship)
- \$350 Full Regular Registration
- _____ Other amount (please explain: _____)

The entire balance must be paid by the start of the retreat, February 27, 2026. No refunds will be issued after January 1, 2026. Registration fees may be transferred to other participants.

Confidentiality Agreement

For the privacy of all participants and staff, we ask you to keep everything shared during the retreat confidential. By signing below, you agree to respect this commitment:

Husband's Signature: _____ **Date** _____

Wife's Signature: _____ **Date** _____

Note to the Organizers (optional)

Is there anything you would like to ask or let the retreat organizers know? _____

Please return application with payment (if paying by check) to:

JCity Center for Hope and Renewal
504 E. Broadway Blvd.
Johnston City, IL 62951

For more information email jcitycenter@gmail.com or call 618-952-1272