San Alfonso Retreat House
755 Ocean Avenue
Long Branch, NJ 07740
Phone: 732-222-2731, x139 Fax 848-800-8717
E-mail: info@sanalfonsoretreats.org

2026 SUMMER SILENT DIRECTED RETREAT REGISTRATION FORM

I would like to register for the (date):_____***Summer Silent Directed Retreat***.
Available dates: June 21-28, 2026 August 29 – September 5, 2026

Last Name: _____ **First Name:** _____ **Prefix:** _____

Religious Community: *(initials)* _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

E-mail: _____ ***Cell Phone:** _____
***REQUIRED**

Spiritual Director Request _____

Payment Information–Retreat Stipend $915.00

*To reserve a space on a retreat, please complete the registration form and enclose a **$100 non-refundable deposit**. Please make checks payable to: **San Alfonso Retreat House**. Stipend balance can be paid upon arrival with check, cash or credit card. Credit card payments for both deposits and balances can also be made on our website. There will be a 3% credit card processing fee for payments made at check-in.*

Deposit: _____ **Balance Due:** _____

Special Needs

If you have any special needs (physical, dietary or other) that we should be aware of, please note them here. (Due to current protocols and limited availability of handicap accessible rooms, specific room requests may not be able to be accommodated.) Please note that our North Wing does not have an elevator and requires the use of stairs. If you are unable to manage stairs, please note that here so that room assignment can be made accordingly.

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Health and Safety Guidelines

Please be aware that attendance at a retreat may be contingent upon any assessed health risk level at the local community or state level. Retreatants will be asked to assess their personal health situation prior to the retreat to discern whether it is safe to attend at that time.

Signature: _____ **Date:** _____