2026 LAY DIRECTORS

Women's Weekend: Jan. 16 - 18, 2026

Please send registration to:

Sherry Marvin
1300 Forest Court
DeWitt, IA 52742
563-370-6978
marvinpd@windstream.net

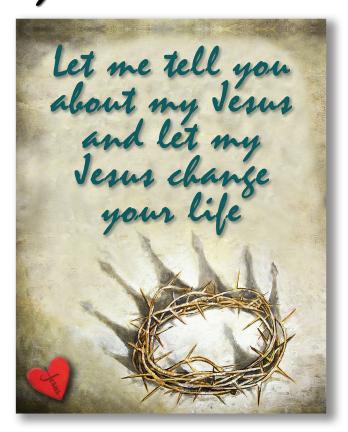
Men's Weekend: Jan. 30 - Feb. 1, 2026

Please send registration to:

Mike Burken
PO Box 63
Grand Mound, IA 52751
563-343-0410
mjburken@gmail.com

for I know the plans I have for you, declares the Lord, plans to prosper you and not barm you, plans to give you hope and a future. -Veremiah Z9:11

Is it time for you to attend?



Please join us for a
CHRISTIAN
EXPERIENCE
WEEKEND
(CEW)

Christ has given you many weekends... Why not spend one with HIM?

Christian Experience Weekend is a spiritual retreat that offers adults (18 years & above) an opportunity to take a break from everyday life, take a look at whom they are and where they are going. This is an opportunity to discover yourself, your faith and your GOD. The weekend includes talks, small group discussions, private reflection, liturgy and plenty of time for fellowship with a team of lay people, a priest, and spiritual directors conducting it. It is a weekend to listen, pray, learn, relax and be refreshed. The weekend welcomes everyone, regardless of where they are in their spiritual lives. Many people attend to improve their relationship with Christ and others to spend time and reflect.

ALL DENOMINATIONS **ARE WELCOME!**

What are the specifics?

LOCATION:

St. Joseph's School, DeWitt All meals and sleeping accommodations are provided. Special arrangements can be made for those with moderate physical conditions.

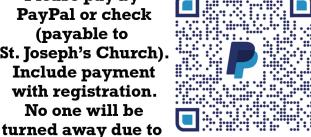
HOW TO REGISTER:

Complete the registration form and mail it along with payment to one of the lay directors listed on the brochure. You may also drop it off at the St. Joseph's Church office.

Cost: \$45.00/person Please pay by PayPal or check (payable to St. Joseph's Church). Include payment with registration.

No one will be

inability to pay.



TIME:

Arrive no earlier than 7:30 p.m. on Friday. The weekend will end around 4:30 p.m. on Sunday. More information will be sent after registration is turned in.

CEW Registration

Name:	
(As you wish fo	or it to appear on your nametag)
Address:	
Phone:	DOB:
Email:	
Religion:	
Parish:	
Place of employm	nent:
Hobbies/Interests	5 :
Note any dietary o	or health needs:
Married ()	Single () Widowed ()
Divorce	ed () Separated ()
Spouse:	
Children/Ages:	
Has spouse attend	ded CEW: Yes () No ()
Who encouraged	you to attend this CEW:
Friends/Relatives	s who have previously made a
CEW/Cursillo/TE	EC:
Friends/Relatives	s also attending this CEW:
Emergency Conta	act (name & phone number):