

# RCM 25<sup>th</sup> Anniversary Celebration

May 31—June 2, 2019

## Christian Retreat Center

369 CRC Drive  
East Waterford, PA 17021

[www.crctims.org](http://www.crctims.org)

### Special Counselors Edition

We are combining our 25<sup>th</sup> Anniversary Celebration with other events we are holding at the Christian Retreat Center in Pennsylvania this summer so that some of you can combine your trip with our special “add-on” opportunities.

- Come for **Internship Alumni Day** on June 2.
- Audit our **Survivors’ School of Healing**.  
Part A: Primary Identity Approach (May 28-31)  
Part B: Ritual Abuse (June 2-4)

*If you plan to come to the Survivors’ School of Healing WITH A SURVIVOR,  
PLEASE WAIT to register as part of the survivor’s registration.  
Those forms will be available sometime in January 2019.*

#### Who May Attend:

1. If you are an alumnus of the former Tom Hawkins Memorial Internship Program or the more recent RCM DID Training Program, you are invited to attend the Internship Alumni Day on June 2.
2. If you are a counselor or prayer minister on our mailing list or referred by someone on our mailing list, you may apply to audit Part A and/or B of the Survivors’ School of Healing.

Attendance at Part A or an online Survivors’ School of Healing or a Basic Week of the Tom Hawkins Memorial Internship or Week 1 of the RCM DID Training Program is required to attend Part B of the school.

#### Cost

Internship Alumni Day: No charge

Survivors’ School of Healing Part A: \$150 Part B: \$75 (includes notebooks)

Lodging & Meal prices on next page

#### Accommodations:

At the retreat center:

- **Lodge**  
Priority for the fully furnished, hotel-style lodge rooms will be given to those coming with a survivor for the Survivors’ School of Healing. You may be put on a waiting list for a lodge room. Each room has two queen-sized beds and complete bath. All bedding, towels, and hair dryer is provided. No irons.
- **Cabin**  
The cabins have 6 bunk beds, 2 sinks, 2 toilets, and 2 showers. Bedding and towels are not provided for accommodation in the cabins. Minimum 2 persons per cabin.
- **RV sites**

Nearby **hotels:** The nearest hotel is an Econo-Lodge in Mifflintown, PA, which is a half hour away. Additional hotels in Reedsville, Shippensburg, Milroy, Carlisle, and Chambersburg, PA, are about one hour away.

#### Meeting Site:

The lodge, where most meetings will take place, is a new and modern facility with rustic décor. Wi-Fi is available throughout but may become slow if too many people are on it at once. Only AT&T cell phone coverage works at the site. A full refrigerator is available in the lounge for common use. There are no restaurants nearby.

**25<sup>th</sup> Anniversary Celebration  
Counselor Registration Form  
May 31—June 2, 2019**

**Name(s):** \_\_\_\_\_

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

E-mail address: \_\_\_\_\_ Phone: \_\_\_\_\_

For how many years have you been a Christian? \_\_\_\_\_

What church do you attend? \_\_\_\_\_

Name of ministry or therapeutic practice: \_\_\_\_\_

For how many years have you worked with DID clients? \_\_\_\_\_ with RA clients? \_\_\_\_\_

How many DID clients have you ministered to if less than 5? \_\_\_\_ Check here if more than 5 \_\_\_\_

How many RA clients have you ministered to if less than 5? \_\_\_\_ Check here if more than 5 \_\_\_\_

Please initial as appropriate:

\_\_\_\_ I am on the RCM mailing list.

\_\_\_\_ I was referred by the following person on the RCM mailing list:

\_\_\_\_\_.

\_\_\_\_ I am a licensed therapist/counselor/social worker.

\_\_\_\_ I am a prayer minister.

\_\_\_\_ I am also a survivor. (*This will be kept confidential.*)

\_\_\_\_ I would like to participate in the talent show w4ith my talent of

\_\_\_\_\_.

\_\_\_\_ I have the following dietary restrictions for you to pass on to the cook.

\_\_\_\_\_.

\_\_\_\_ I would be willing to pay a small charge for transportation from the Harrisburg, PA airport.

\_\_\_\_ I'm willing to provide transportation for \_\_\_\_ extra people & luggage from the Harrisburg, PA airport.

Required of all:

\_\_\_\_ For the spiritual safety of all, I agree to complete a set of spiritual renunciations, which will be assigned upon acceptance.

\_\_\_\_ I agree to sign the following statement when I arrive at the site:

"I understand and agree by my signature that RCM reserves the right to refund my payment and ask any person to leave who is perceived to be unable to cope with the material presented and/or whose presence is perceived to be a threat to others in attendance."

**I desire to register and to pay for the following:**

\_\_\_\_\_ Survivor School of Healing Part A: Primary Identity Approach **\$150**

\_\_\_\_\_ Survivors' School of Healing Part B: Ritual Abuse **\$100**

\_\_\_\_\_ I desire to be put on a waiting list for a possible lodge room. My second choice is indicated below.

The following prices are PER PERSON for lodging and meals. Please CIRCLE the option you are choosing. Call 540-249-1027 for any variations or ala carte options.

- Entire School plus 25<sup>th</sup> Anniversary Celebration (Tues. dinner to Tues. lunch—May 28-June 4)
  - Lodge Single: **\$519.10** Double: **\$488.35** Triple/Quad: **\$458.10**
  - Cabin: **\$332.25** RV site: **\$272.75**
  - \_\_\_\_\_ I am willing to share a cabin. \_\_\_\_\_ I desire a cabin for my group of \_\_\_\_\_.
  - Meals only (7 lunches; 7 dinners): **\$157.50**
- Part A School plus 25<sup>th</sup> Anniversary Celebration (Tues. dinner to Sun. breakfast—May 28-June 2)
  - Lodge Single: **\$378.50** Double: **\$355.25** Triple/Quad: **\$343.50**
  - Cabin: **\$241.50** RV site: **\$198.00**
  - \_\_\_\_\_ I am willing to share a cabin. \_\_\_\_\_ I desire a cabin for my group of \_\_\_\_\_.
  - Meals only (4 lunches; 5 dinners): **\$102.75**
- Part B School plus 25<sup>th</sup> Anniversary Celebration (Fri. dinner to Tues. lunch—May 28-June 4)
  - Lodge Single: **\$306.10** Double: **\$296.00** Triple/Quad: **\$277.90**
  - Cabin: **\$204.00** RV site: **\$168.75**
  - \_\_\_\_\_ I am willing to share a cabin. \_\_\_\_\_ I desire a cabin for my group of \_\_\_\_\_.
  - Meals only (4 lunches; 4 dinners): **\$90.00**
- Internship Alumni Day plus 25<sup>th</sup> Anniversary Celebration (Fri. dinner to Mon. breakfast—May 31-June 3)
  - Lodge Single: **\$231.25** Double: **\$217.45** Triple/Quad: **\$203.70**
  - Cabin: **\$147.75** RV site: **\$121.00**
  - \_\_\_\_\_ I am willing to share a cabin. \_\_\_\_\_ I desire a cabin for my group of \_\_\_\_\_.
  - Meals only (2 lunches; 3 dinners): **\$57.75**

\_\_\_\_\_ Total payment

**Method of Payment** (Circle one):

Phone (540-249-1027) - Enclosed check - Credit card as follows:

|  |   |
|--|---|
| Name on Card: _____ -<br>_____                                   |   |
| Credit card No.: _____ CVV _____ (3-digit security code on back) |   |
| Expiration Date: ____/____                                       | (We do not take <b>Discover Card.</b> ) |
| Signature: _____ -<br>_____                                      |   |

Please **print** and **mail** to: Restoration in Christ Ministries, PO Box 479, Grottoes, VA 24441 or **FAX** to 540-249-9716 or **scan** and **e-mail** to [rcmoffice@rcm-usa.org](mailto:rcmoffice@rcm-usa.org).