

Topic: "AA Spirituality: In The Words Of Bill"

Matt Talbot Group 60 July 11th-13th, 2025

San Alfonso Retreat House

755 Ocean Ave • Long Branch, NJ 07740 • (732) 222-2731

Full Weekend \$340.00

• Includes room and meals Friday – Sunday Lunch.

- Check the "Full Weekend" box on the registration form below & complete all information.
- Includes all meals & sessions Fri-Sun, NO overnight

Day Hopper \$175.00

- accommodations
- Day Hopper deposit is \$50.00

• Full weekend deposit is \$50.

Please make deposit Check/Money Order payable to Matt Talbot Group 60.

<u>Balance of payment</u> is payable to **San Alfonso's Retreat House** at time of check in; cash, check or credit card will be accepted (service fee may be applied to credit card use).

Please indicate if a first floor or handicap room is needed for medical reasons ONLY. For special requests, we suggest you register as early as possible, and we will do our best to satisfy these. Please let us know of any dietary restrictions or food allergies during registration or check-in. Due to the capacity not all requests will be met except for medical or allergy reasons.

Please note, you will not hear from us once you have sent in your deposit. *Check-in begins at 4:00 p.m. on Friday, July 11th, 2025 in the Main Conference Room. <u>You will not have access to the grounds before 4:00pm!</u> If you register but are unable to attend, please notify our secretary as soon as possible so that we may offer the room to someone on the waiting list. Please complete the registration form below and send the correct NON-REFUNDABLE deposit listed above. Please contact with questions/concerns*

DO NOT MAIL YOUR REGISTRATION FORM TO THE RETREAT HOUSE!

Please mail payment to:	Patrick Nolan	Questions or issues?	
	3379 Seip Rd	Phone: (973) 570-2451	
	Macungie, PA 18062		
	Email: pnolan0703@gmail.com		
Yours truly,			
Patrick Nolan - Secretary, N	latt Talbot Group 60		
	Tear off and	return with Payment	
I WILL attend[] Ful	l Weekend Deposit \$50.00 [] Day Hopper \$50.00 []	
I am a new retreatant (NOT a l	nember of another Matt Ta	lbot Group) []	
Name:		Medallion #:	
Address:			
City:	State:	: Zip:	
Preferred Room #: () Emai	il:	
Handicap Room ()	Phon	ne:	
Food Allergies:			

