

Reference Form for Presenter Formation for Centering Prayer

Please supply the Formation Team with the following details and **mail to:**

Bethany Retreat Center, PO Box 129, Frenchville, PA 16836

I recommend that _____ be considered as a Presenter In Training for Centering Prayer.

Name: _____

Your Contact Information: Email: _____ Daytime phone: _____

Role:

_____ Coordinator

_____ Contact Person

_____ Other – Specify _____