

**Enrollment Form**  
**"The Paschal Journey: Through Darkness into Light"**  
**A Pilgrimage with the Most Rev. Frank T. Griswold**  
**at The Cathedral College of Washington National Cathedral**  
**April 13 – 15, 2006\***

**Full Name:**

**Mailing Address:**

**City:**

**State:**

**Zip:**

**Home Phone:**

**Business Phone:**

**E-mail Address:**

**Please list any dietary or mobility restrictions of which we should be aware to better accommodate you during your stay.**

**I would like to extend my stay through Saturday night and attend the 8 am service on Easter Sunday.**

**Yes**

**No**

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**Pilgrimage cost - \$350**

**Cost includes programs, reserved seating at all services, meals and accommodations.**

**\* - For those wishing to extend their stay and overnight at the College on Saturday, there is a \$85 additional charge.**

**Make checks payable to Washington National Cathedral and return to address below:**

**Washington National Cathedral**  
**Attn: Pilgrimage Coordinator**  
**3101 Wisconsin Ave., NW**  
**Washington, DC 20016-5098**