



EYES TO SEE

Faith Lutheran Church - Pierre, SD
January 14-15, 2024

Have you ever wished to see more clearly and know more confidently what is of God and what is not? If so, then this Eyes to See retreat is for you! The devil makes nothing new yet remarkets his old deceptive ways to new generations. This presentation will give you Eyes to See both the works of the devil to avoid, and the works of God to cling to that you may abide in His peace and safety.

Rev. Matthew Wurm was born in August of 1981 in Wisconsin. He has been a pastor for 15 years and is the Senior Pastor at Mt. Calvary Lutheran Church, Brookings, SD. In 2014 he was inducted as a Fellow of DOXOLOGY. He and his wife, Kyra have been blessed with six children. In his free time, he likes to build things and resurrect dead vehicles and equipment.

Things to Know

When: January 14-15, 2024

Where: Faith Lutheran Church
Pierre, SD

Who: High School & College students

Cost: \$40 per person

Contact: Pastor Sam Handschke
samhandschke@gmail.com
OR
Tana McKenna
888-482-6630 ext.4
retreats@higherthings.org

Time: Sunday 6 pm - Monday 3 pm

Meals: Sunday supper
Monday breakfast, lunch and snacks

What to Bring: toiletries, especially deodorant!
changes of clothes
sleeping bag
pillow

RSVP: via online registration at the
Higher Things website
by January 8, 2024





INDIVIDUAL REGISTRATION FORM

Higher Things® Retreats

Registrant Section

Last			First	MI	Date of Birth	<input type="radio"/> Male	<input type="radio"/> Female
Street			Home Phone			Cell Phone	
City	ST	Zip	Registrant E-mail Address				

- I have attended a Higher Things Conference before
- I have attended a Higher Things Retreat before
- I have a disability/medical conditions/dietary or special need:
- Youth (12-17) Young Adult (18-20) Adult (21+)
- Pastor

*Indicate above which age group the Registrant will be
at the time of the retreat.*

*(Please only include special needs that affect housing assignments and/or dietary requirements.
Other special needs should be discussed with your Group Leader and chaperones.)*

Group Church Name		Church Phone	Group Leader's Name
Street	City/ST	Zip	Pastor's Name

Parent/Guardian Section (required for minor youth participants only)

First	Last	Home Phone	Parent's Cell Phone
Address (if different from above.)	City	ST	Zip
Parent's E-mail Address			

___ Can we add you to an Higher Things email list?

I grant permission for my minor child, named above on this form as "Registrant," to attend the Higher Things Retreat in _____ . I assume all responsibility and liability for injury to said minor while at the Higher Things . I also give Higher Things, Inc. permission to use any still, audio, and/or video images of my child in publicity and news releases.

Parent's Signature

Date