

ART QUILTERS UNLIMITED
2018 RETREAT REGISTRATION FORM

NAME _____

ADDRESS _____

CITY, STATE _____ ZIP _____

TELEPHONE _____

EMAIL _____

ROOMING INFO

I plan to room with _____

*Please advise if you have any conditions that prohibit you from climbing stairs or staying on a second floor _____

**Please indicate if you have medical conditions for which you are prescribed medication or for which you are under a Doctor's care. Also, please indicate any allergies that you may have including food related. _____

***Male Members will be charged a Single Rate. If by any chance the group has an odd number attending the extra person will get a Double Occupancy Rate.

PAYMENT PLAN

___ I would like to pay in full - \$390.00 (single), \$282.00 (double) Due at registration

___ I would like the payment plan

Single

Double: 2 people to room

\$195.00 due at registration

\$141.00 due at registration

\$195.00 due Aug.1, 2018

\$141.00 due Aug.1, 2018

\$390.00

\$282.00

Cancellations: There will be **NO** refunds for non-medical emergencies after Aug 1, 2018

If a registrant is unable to attend retreat it is her/his responsibility to find someone, if unable to find a replacement, registrant is responsible to pay original single rate for your room-mate at a cost of \$105.00.
