

Northwest Bead Society Fall Retreat

Registration / Reservation Form

October 29, 30 & 31, 2010

The Retreat Center at Camp Burton, Vashon Island, WA

NAME:	FIRST NAME FOR NAME TAG:
ADDRESS:	
CITY / STATE / ZIP	DAY PHONE:
E-MAIL	EVE PHONE:

Note: You must be a current member of the Northwest Bead Society to attend this Retreat. You will have priority for registration through July 15, 2010.

Registration is open to new members as of July 16, 2010. NWBS membership forms are available at: www.nwbeadsociety.org or at our meetings. If you are not a current member and would like to attend, please include your membership application and check for your current dues with your retreat registration.

I am a member of NWBS Yes No, I have included my membership application & dues.

REGISTRATION FEES (Choose One)	Amount	
Full Registration Fee, OR	\$175.00	
Reservation Deposit (Balance Due by 8/19/10)	\$ 50.00	
Late Registration Fee, submitted after 8/19/10, additional	\$ 10.00	
TOTAL ENCLOSED		
If registration is full, I would like to be on the waiting list.	Yes	No

Sleeping Accommodations (3 per room)

I would like to room with: _____ AND _____

I would like to be with others like me: night owls early birds I am both I am a snorer

First Aid: I am currently trained for CPR First Aid & willing to be designated CPR/First Aid person.

Do you have any mobility issues: Yes No

Meals: Vegetarian entrees Dietary health restrictions: _____

If you have special dietary needs, refrigerators are available for any supplemental foods you might bring.

Volunteer Jobs I am willing to help with:

- Setup (Friday Aft)
 Registration/Check In
 Whatever is needed during the weekend
 Pre-retreat preparations
 "Goodie" Bags
 Clean Up meeting space & room check (Sun Aft)

I would like to do a demonstration during the event on:

Cancellation Policy:

A full refund, less \$15 processing fee, will be made on cancellations received before Aug 25.

After that date, refunds will be made (less the processing fee) only if your space is filled from the waiting list.

All registrations/reservations will be processed by postmark date. After October 15th, please contact Mary Irvine, 206-419-8527, ime@gwestoffice.net, prior to mailing your registration. Prior October 15th, mail your completed registration form and payment (by check only) to:

NWBS Retreat Registration
 c/o K. Repp, 5032 171st Ave SE
 Snohomish, WA 98290

Make checks to: Northwest Bead Society
Please keep a copy for your records.

FOR HIGHLY OFFICIAL USE ONLY	
Postmark Date	
Total Due	
Check #	
Check Amount	
Balance Due	
Balance Due Rcvd	
Check #	
Check Amount	