

PLEASE PRINT

Name Mr/Mrs/Ms _____
 Address/City/State/Zip _____
 Phone / Home _____ Cell _____
 Email _____
 Emergency contact/s NAME (husband, sister, daughter, son, brother, mother) _____
 Home/Work/Cell _____
 Dietary restrictions/special needs, Allergies (including food) or medical conditions we need to be aware of: _____

- Y / N** Do you want to room with a friend who is also attending this retreat? Roommate's name _____
- Y / N** Would you like to room with someone you haven't met yet?
- Y / N** Do you need a smoking permitted room?
- Y / N** Do you require a handicap access bathroom?

Please be sure you understand our cancellation policy before you register.

- \$100 non-refundable cancellation fee.
- Cancellations within 30 days of retreat are not refundable.
- Registration may be transferred to a new person of your choice, or we may have someone on a waiting list, but you are still responsible for the \$100 non-refundable cancellation fee. The new person will send in their registration form and fee, and then we will refund your fee less your \$100 non-refundable cancellation fee within 6-8 weeks of written notification.
- All cancellations must be in writing (mail/email) to qualify for a refund.
- You will be responsible for a single rate room if no roommate is available. If your roommate has to back out and another roommate is not available, you will be responsible for a single rate room.
- In the event we need to cancel a retreat, your entire payment/s will be refunded in full within 45 days, or can be applied to another retreat. Cancellation and Travel Insurance, usually purchased through your travel agent, is recommended. BSC is not responsible for travel refunds.
- Location: Clarion Hotel, 350 E. International Speedway Blvd, Deland, FL 32724
- We accept Personal check, Cashier's check, US Postal Money Order, or **Electronic Billing** (preferred).
There is no fee for Electronic Billing. You will receive an email with instructions if you choose Electronic Billing.
- You can also choose to pay in FULL with PayPal (add \$30 processing fee per person).
- A \$35 processing fee is charged for returned checks.

Personal Liability Waiver and Indemnification Agreement

We take your safety and the security of your equipment very seriously, but we will not be liable for any personal injury, loss/theft or damage anytime during the retreat. Your attendance constitutes your agreement to indemnify BeSewCreative, Mark Sherman, Barbara Linares and Clarion Hotel from any claim for injury, loss or damage for any reason. You are responsible for any damage to Clarion Hotel property, facilities, or equipment caused by you or your non quilting companion through negligence or willful intent.

Circle desired package/s → →	Per Person Double	Per Person Single	Non-Quilting Companion	Commuter 2 days /5 meals		Commuter 4 days /10 meals
				Thurs/Fri	Sat/Sun	
4 days /3 nights /10 meals	\$ 611	\$ 728	\$325	\$262.50	\$262.50	\$ 445

Rates include ALL retreat activities, workshops, accommodations (excluding commuters), meals, and taxes. **KIT fees not included.**

50% deposit due at registration **Balance Due No Later Than July 30, 2012**

For registration after July 30, 2012 payment is due in FULL.
 Late registration seating will be confirmed according to earliest postmarked date registration and payment are sent.

Sign here to confirm that you have read, understand and agree to all the policies explained above.

Incomplete registration forms will not be processed.

_____ Date _____

Make Checks payable to: **Rhonda Baker**

Print and send **registration form** and **payment(s)** to: Rhonda Baker, 1118 Gulf Oaks Drive, Tarpon Springs, Florida 34689
 Email any questions to Cissy33@BeSewCreative.com or call 727-430-7620 (cell)

PRINT A COPY OF THIS FORM FOR YOUR RECORDS

OFFICE USE	Electronic Payment Deposit request sent _____	Received _____	Amount _____
	Electronic Payment Balance request sent _____	Received _____	Amount _____
	Deposit check # _____	Date _____	Amount _____
	Balance check # _____	Date _____	Amount _____