

Helping Hands Quilt Guild
Retreat Registration Form
Camp Pecometh August 13 - 16, 2020

Please print

Name: _____ Today's Date: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Email address: _____

Emergency Contact Information

Contact Name: _____ Phone Number: _____

Relationship to Participant: _____

Arrival and Departure Schedule:

___ Arrive Thursday, August 13, 2020 at 9:00 am

___ Arrive Friday, August 14, 2020 at 10:00 am

All retreat participants must vacate their rooms Sunday, August 16, 2020 by 10:00 am and vacate the retreat premises by 3:00 pm Sunday afternoon

Meal Schedule:

Thursday 8/13	Dinner: 5:30 pm (Lunch on your own)
Friday 8/14	Breakfast: 8:00 am, Lunch: 12:00 pm, Dinner 5:30 pm
Saturday 8/15	Breakfast: 8:00 am, Lunch: 12:00 pm, Dinner 5:30 pm
Sunday 8/16	Brunch: 10:00 am

Dietary Needs:

Do you have food allergies? Yes No If yes, please list: _____

Do you have other dietary needs? Example: Vegan, vegetarian, pork free, etc. Yes No If yes, please list: _____

Room Information:

Cost:

___ Arrive Thursday 8/13 at 9 am and remain until Sunday 8/16 – 3 nights, 8 meals

___ Double occupancy - \$335

___ Triple occupancy - \$305

___ Arrive Friday 8/14 at 10 am and remain until Sunday 8/16 – 2 nights, 6 meals

___ Double occupancy - \$245

___ **Optional:** A t-shirt will be available specifically designed for this retreat. Cost \$10 each.

T-Shirt Size: XS – Sm – Med – Lg – XL – XXL – 3XL (sizes run small, order next size up)

Room requirements:

Check all that apply:

- Do you require a first-floor room due to health concerns?
- Do you require a handicap room due to physical limitations/health concerns (only two available)?
- Double occupancy – name of desired roommate: _____
- Triple occupancy – names of desired roommates: _____

Payment Information:

A deposit of half is due at time of registration (the entire amount may be paid, if desired)

The remainder is due no later than July 15, 2020

Please make checks payable to: **Helping Hands Quilt Guild**

Mail payment to:

Retreat Registration
 c/o Pam Withrow
 4406 Westville Road
 Wyoming, DE 19934

For Staff Use Only

Date Received: _____

Deposit Amount: _____ Check #: _____ Cash Amount: _____

Remainder Paid:

Date: _____ Amount: _____ Check #: _____ Cash Amount: _____

- 3 nights, 8 meals - single
- 3 nights, 8 meals – double
- 3 nights, 8 meals - triple
- 2 nights, 6 meals – single
- 2 nights, 6 meals – double

Room Number Assigned: _____

- Bailey Lodge – set up in room 1, first room when entering the retreat center
- Carter Lodge - set up in room 2, second room by the dining room

Order t-shirt
 Size: _____