

REGISTRATION FORM for: Decatur Methodist Sunday School Retreat

Arrive: Friday, 8/14/09 after 3 pm Depart: Sunday, 8/16/09 after Breakfast



- Use this form to register up to 2 adults and/or 3 youth; if you need to register more than 2 adults, please copy this form and attach.
- Use a separate registration form for anyone with a different address.
- Please print clearly.

Names(s): _____

Address: _____

City: _____ ST _____ Zip _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Email Address: _____

Names of Adults (Last, First, Middle Initial)	Gender	Relationship to Registrant Above	Been to The Mtn. Before?	Age (optional)	Fees
1)					
2)					
Package Rate: Adult Shared Occupancy: \$160 per person					Total Adult Fees: \$

Names of Youth (Last, First, Middle Initial)	Gender	Age	Relationship to Registrant Above	Been to The Mtn. Before?	Fees
1)					
2)					
3)					
Youth Rates: Ages 0 to 3 yrs: \$ 0 per youth Ages 4 to 12 yrs: \$40 per youth Ages 13 to 17 yrs: \$52 per youth				Total Youth Fees: \$	
TOTAL DUE:					\$

Housing Considerations: (Room requests will be honored based on availability. Requests for specific cabins or rooms not guaranteed. Housing assigned on a first-come/first-served basis except for mobility needs. If you do not indicate roommate preferences, other registrants may be assigned as roommates.)

Roommates (if not registering together): _____

I prefer to be housed in a Cabin _____ The Lodge _____ (both options are subject to availability)

Handicapped accessible Room: Yes _____ No _____ Mobility Issues/Needs: _____

Food Preferences: Vegetarian _____ Vegan _____ Allergies _____ Other (Please explain) _____

NO SMOKING in all Mountain buildings. Smoking allowed only in an outdoor designated smoking area.

Payment Information: Full payment due at registration.

_____ Check – \$ _____ (payable to The Mountain)

_____ Charge \$ _____ to my Visa, MasterCard or Discover credit card:

Name on Card (please print): _____

Card Acct #: _____ Exp. Date _____ Cvv Code _____

Authorized Signature: _____

Cancellation Policy:

For cancellation notices received in writing 30 days or more prior to program start date, fees paid less a \$35 per registration administrative fee will be refunded. Cancellations less than 30 days prior to program start will receive a refund of fees paid less a \$60 administrative fee per registration. All cancellation notices/refund requests must be made in writing and be received by The Mountain prior to the program start.

- Unless otherwise informed, The Mountain will consider your registration as permission to use photographs and audio/video recording of you and your group for Mountain promotion, its website or news media coverage.
- The Mountain assumes no liability for accidents, illnesses or their treatment while you are a guest.
- In Case of Emergency:** Please provide the following for contact information purposes:
Name _____ Relationship _____ Phone _____

Office use only prog. no.	Payment received	Housing	Data	Confirmed
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