

**ADULT REGISTRATION FORM The Mountain Institute for Social Change**  
**Building a Vocal Community ® Finding Your Voice**  
**With Dr. Ysaye Maria Barnwell**



**Arrive: Thursday 3/11/10 between 3 – 6 pm. Depart: Sunday 3/14/10 after Lunch**

- Use this form to register up to 2 adults over age 32.
- If you need to register more than 2 people, please copy this form and attach.
- Use a separate registration form for anyone with a different address.
- Please print clearly — all fields are necessary.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

Names of Adults	Gender	Relationship to Registrant Above	Been to The Mtn. Before?	Age (optional)	Fees
1)					
2)					

**Sliding Scale for Adults over 32 (includes housing, food and program):**

Please place yourself on the scale. **\$ 295 - \$500**

**Fees above \$295 will contribute to young adult sponsorships**

\$

**Commuter Rate:** (no sliding scale available) \$ 225 (must participate in total program)

**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 RECEIVED 30 to 15 days prior to program start will receive a refund of fees paid less a \$100 administrative fee per registration. No refund for cancellations RECEIVED 14 days or less before program start.

All cancellation notices/refund requests must be made in writing and be received by The Mountain prior to the program start.

**Housing Considerations:** Room requests will be honored based on availability. Requests for specific cabins or rooms cannot be guaranteed.

Housing assigned on a first-come/first-served basis except for mobility needs.

If you do not indicate a roommate preference, other registrants may be assigned as roommates.

Roommates (if not registering together): \_\_\_\_\_

Mobility Issues/Needs: \_\_\_\_\_

I need a Handicapped Accessible Bathroom Yes \_\_\_\_\_ No \_\_\_\_\_

**Food Preferences (if applicable):**

Vegetarian \_\_\_\_\_ Vegan \_\_\_\_\_ Allergies \_\_\_\_\_

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

- 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      Payment received      Housing      Data      Confirmed

**Payment Information: Full payment due at registration. Make checks payable to The Mountain.**

\_\_\_\_\_ Check – \$ \_\_\_\_\_      \_\_\_\_\_ Visa/Mastercard/Discover – charge \$ \_\_\_\_\_ to my credit card:

**Card Acct: #:** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_ **C V V Code** \_\_\_\_\_

**Name on Card (please print):** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_

**YOUNG ADULT REGISTRATION FORM** The Mountain Institute for Social Change  
**Building a Vocal Community® Finding Your Voice**  
 With Dr. Ysaye Maria Barnwell



**Arrive: Thursday 3/11/10 between 3 – 6 pm. Depart: Sunday 3/14/10 after Lunch**

- Use this form to register up to 2 young adults 18-32.
- If you need to register more than 2 people, please copy this form and attach.
- Use a separate registration form for anyone with a different address.
- Please print clearly — all fields are necessary.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you hear about this program? \_\_\_\_\_

Names of Adults	Gender	Relationship to Registrant Above	Been to The Mtn. Before?	Birthdate (required for Young Adult Rate)	Fees
1)					
2)					

**Sliding Scale for Young Adults 18-32 (includes housing, food and program):**

Please place yourself on the scale. **\$ 240 - \$295**

**Fees above \$240 will contribute to other young adult sponsorships**

\$ \_\_\_\_\_

**Commuter Rate:** (no sliding scale available) \$ 200 (must participate in total program)

**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 RECEIVED 30 to 15 days prior to program start will receive a refund of fees paid less a \$100 administrative fee per registration. No refund for cancellations RECEIVED 14 days or less before program start.

All cancellation notices/refund requests must be made in writing and be received by The Mountain prior to the program start.

**Housing Considerations:** Room requests will be honored based on availability. Requests for specific cabins or rooms cannot be guaranteed.

Housing assigned on a first-come/first-served basis except for mobility needs.

If you do not indicate a roommate preference, other registrants may be assigned as roommates.

Roommates (if not registering together): \_\_\_\_\_

Mobility Issues/Needs: \_\_\_\_\_

I need a Handicapped Accessible Bathroom Yes \_\_\_\_\_ No \_\_\_\_\_

**Food Preferences (if applicable):**

Vegetarian \_\_\_\_\_ Vegan \_\_\_\_\_ Allergies \_\_\_\_\_

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

▪ 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 \_\_\_\_\_

**Payment Information: Full payment due at registration. Make checks payable to The Mountain.**

\_\_\_\_\_ Check – \$ \_\_\_\_\_ Visa/Mastercard/Discover – charge \$ \_\_\_\_\_ to my credit card:

**Card Acct: #:** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_ **C V V Code** \_\_\_\_\_

**Name on Card (please print):** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_