

QUILTERS RESCUE MISSION

Registration Form - November 9 - 12, 2009

(PLEASE PRINT CLEARLY)

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

E-Mail _____

Preferred roommate _____

Has your roommate registered?

1st class choice _____

2nd class choice _____

- Class assignments will be made after June 1, 2009.
- Confirmation of registration and additional information will be mailed after July 1, 2009.
- Questions can be directed to Margaret LaBenne, (828) 693-1337 or e-mail quiltersretreat@bellsouth.net

Through the submission of the registration form and by subsequent enrollment into this program, I indemnify and hold harmless Quilters Rescue Mission as well as its representatives from any claims of personal illness or injury that might occur to me during my participation in this program. (w)

For Office Use Only		
Amt _____	# _____	Reg # _____

Tuition and Lodging Cost

- Registration, 3 Nights Lodging, Meals and SOYO space \$ 265.
(Based on double occupancy
Note additional charge to room alone)
- Class Fee **add** \$ 60. _____
- Room Alone **add** \$ 140. _____

TOTAL **Tuition and Lodging** \$ _____

Mail this form
with the registration fee of \$45.00 to:

Quilters Rescue Mission
1012 Butternut Trail,
Hendersonville, NC, 28739

Only one registration per envelope please.

Balance is due by September 7, 2009