

**RETREAT 2010
REGISTRATION FORM**

Name: (for name-badge) _____

Church: _____

Address: _____

City: _____ State: _____ Postal/Zip Code: _____

Telephone: _____ - _____ - _____ Fax: _____

Email: _____

CONFERENCE FEES

One Day only - Saturday Only \$60.00 \$ _____
Includes continental Breakfast, Main Session & Luncheon

OR

Full Retreat 2 - Days

Welcome Reception: 4/16/2010
Dinner: 4/16/2010 Ocean Reef Room
Continental Breakfast: 4/17/2010 Ocean Reef Room
Main Session: 4/17/2010 Tiffany Room
Luncheon: 4/17/2010 Ocean Reef Room

Luncheon Meal Packages

Choice A SANTA FE CHICKEN SALAD
 Choice B PASTA PREMAVERA

Lodging

Room Type	Rate Per Person Per Night		
_____ Single Occupancy (1 person in room)	\$202.18	=	\$ _____
_____ **Double Occupancy (2 people in room)	\$132.68	=	\$ _____
_____ **Double Occupancy (3 people in room)	\$112.84	=	\$ _____
_____ **Double Occupancy (4 people in room)	\$100.43	=	\$ _____

TOTAL Registration & Lodging \$ _____

**Roommate Request will be honored only when both parties select each other as roommates. If a mutual selection is not entered on the registration form, no roommate request will be recorded. Forms with roommate requests must be turned in together.

**Roommate Request Name _____

Cancellations and Refunds: Registration fees will be refunded, less a \$10.00 administration fee, if cancellation no later 3/16/2010 for Full Retreat Package or 4/01/2010 for Saturday Only Package. After that date, registration fees are non-refundable. Substitutions are allowed.

PAYMENT METHOD

Checks payable to: Old Cutler Presbyterian Church. In memo section indicate WIC RETREAT

Please mail or fax completed registration form with payment to: **OCPC 14401 Old Cutler Rd
Palmetto Bay, FL 33158**

Drop off forms & payment at: **Church Office**

Phone: 305-235-4566 **Coordinator: Gail Tracy**

OFFICE USE ONLY

Date Payment Received: _____ / _____ / 2010
Payment Method: ___ Cash ___ Check Check# _____

Signature (WIC counsel member receiving payment): _____

