

Flying Geese Quilters Guild

Retreat Sign-Up

Date: _____

Name: _____

Email and Cell phone: _____

4 Days/3 nights

3 Days/2 nights (Which nights)

Day Quilter # of days _____ # of meals _____

Single

Double Roommate _____

Handicap Accommodations/First Floor _____

Special Needs, i.e. dietary _____

I want to sit with: _____ (please note that I will do my best but cannot guarantee your request.)

– Please attach \$100 nonrefundable deposit to this form and mail to the Retreat Coordinator.

Coordinator Only: Deposit paid Final Payment Amount _____ Waitlisted