



Quilt Retreat Registration Form

2020 Spring Retreat
White's Wildwood Retreat, Chippewa Falls WI

Name (Please print) _____

Address (Street, City, State, Zip) _____

Cell Phone (_____) _____

E-mail _____

Roommate Request _____

Medical Insurance (Company and policy#) _____

Emergency Contact (Name and phone) _____

Food Allergies/Health Conditions/Restrictions _____

Other Information (check one or more)

Bedding included	Bring towels and toiletries	Individual workstations, Chairs on wheels
Check-in 3pm, check-out 3pm	Commercial Kitchen	High speed internet
Two Group Dinners (online sign-up), other meals on own	Beautiful rural setting	Limit 12 attendees
Make Name Tags <input type="checkbox"/>	Plan a Game <input type="checkbox"/>	CPR certified yes <input type="checkbox"/> no <input type="checkbox"/>

Friday, March 13 – Sunday March 15, 2020

3 days – Fri- to Sun \$175

Payment Policy – Payment in full is due at the time of registration. Fees are non-refundable. You may find another woman to take your paid spot. Send registration form and payment to: Pat Basch, 4040 Stonebridge Dr. S., Eagan, MN 55123. Make check payable to **Dakota County Star Quilters**. (Contact Pat for PayPal or Facebook Messenger payment options.)
Registration deadline 1/14/20

Liability Waiver and Indemnification Agreement: I hereby agree to indemnify Dakota County Star Quilters, its members or volunteers; and agree never to make any claim for injury, loss, or damage to me or anyone accompanying me for any reason. I am financially responsible for damages assessed by the facility. I will abide by the policies set forth. Questions? Contact Pat Basch at tpbasch@hotmail.com

Signature _____
(Without your signature on the preceding line your registration cannot be processed.)

Office Use Only
 Roster I/S Email List Roommate Special Needs Pymt Amt _____ Registration # _____