



Shrine Mont Registration Form

October 25-27, 2019

ADULT ATTENDEE(S)

Full Name: _____

Full Name: _____

YOUTH ATTENDEE(S)

Full Name: _____ (Age & Grade): _____

Full Name: _____ (Age & Grade): _____

Full Name: _____ (Age & Grade): _____

Full Name: _____ (Age & Grade): _____

Full Name: _____ (Age & Grade): _____

CONTACT INFORMATION

Phone: _____ Email: _____

PRICING *(Price includes 2 nights lodging and 6 meals per attendee. Registration and deposit due July 21, 2019.)*

Cost per Person	Number Attending	Total Due	Deposit	Balance Due
Adult (Single Occupancy) Total: Total: \$210 Deposit: \$50				
Adult (Double Occupancy*) Total: Total: \$175 Deposit: \$50				
Youth (ages 13 and up) Total: \$175 Deposit: \$50				
Child (ages 4 – 12) Total: \$55 Deposit: \$15				
Toddler (ages 0 – 3) Free (Crib: \$6)				
Total				

*Double Occupancy = shared bathroom

VOLUNTEER OPPORTUNITIES *(Please indicate how you would like to help with this parish event.)*

- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Planning | <input type="checkbox"/> Children's Program | <input type="checkbox"/> Worship/Reader |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Saturday Evening Game/Activity | <input type="checkbox"/> Altar Guild |
| <input type="checkbox"/> Photographer | <input type="checkbox"/> Bonfire/S'mores | <input type="checkbox"/> Music |

OTHER *(Please indicate any/all that apply to you)*

- | | |
|--|--|
| <input type="checkbox"/> Late arrival (by 7:30 p.m. – save dinner) | <input type="checkbox"/> Need transportation assistance |
| <input type="checkbox"/> Late arrival (no dinner) | <input type="checkbox"/> Can provide transportation assistance |
| <input type="checkbox"/> Dietary restrictions: _____ | |
| <input type="checkbox"/> Special accommodations/requests: _____ | |