

VCQ Celebration 2020 REGISTRATION (please print clearly)
A \$100 non-refundable initial Retreat Deposit must accompany form

NAME: _____

MAILING ADDRESS/STREET: _____

CITY/STATE/ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL: _____ CONFIRM BY EMAIL? YES NO

EMERGENCY CONTACT: NAME _____ PHONE: _____

CELEBRATION FEE:

Includes lodging, food and class registration.

VCQ Member \$385 Non-Member \$485 \$ _____

DAY RATE \$310 Non-Member \$410 \$ _____

Non-Refundable Deposit (\$ 100)

BALANCE DUE BY MARCH 1, 2020: \$ _____

<u>For Committee Use Only</u>	
Initial Retreat Deposit	\$ 100
Block Lotto Kit Fee _____ X \$4.00 =	\$ _____
TOTAL DEPOSIT/FEES RECEIVED	\$ _____

WORKSHOPS:

Are you willing to be a Class Helper? Yes No

Workshop Registration:	Choice #1	Choice #2	Choice #3
Friday, April 24, 2020 (Workshop A)			
Saturday, April 25, 2020 (Workshop B)			

All rooms are considered Handicapped Accessible; if you need additional help in the restroom (shower stall bars, higher toilet), there are limited rooms available with these options. Will you require a more Accessible Room? **YES NO** Will you need assistance to and from classes/auditorium? **YES NO**

LODGING - ROOMMATE REQUESTS:

Roommate #1	Roommate #2	Roommate #3

Rooms provide for a minimum of 3 roommates; maximum 4 (4th bed is a trundle so please keep this in mind when selecting your roommates)

Indicate Special Dietary Restrictions:

Are you a nurse or other medical professional? _____

Is this your first Celebration? **YES NO** How many Celebrations have you attended? _____

To register, make check payable to VCQ & register at the Aug. 10, 2019 meeting OR send this form (one form per person) to: Kathy McCrea, 3852 Persimmon Circle Fairfax, VA 22031. Email: kathy.mccrea@cox.net