



REGISTER

To register, fax or mail a completed form along with a \$25.00 non-refundable deposit for each person (faxed registrations must include credit card or EFT information). Registrations are processed in the order they are received. All correspondence and confirmation will be sent to the contact person.

Name of Group: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____

Phone: _____ Cell Phone: _____

Email: _____

Did you attend a 2010 SpringHill Winter Teen Retreat? Y N

Will you be participating in the teambuilding time on our teams course Friday 1-4pm? Y N How many? _____
Additional cost \$5/person. Money due on arrival.

COST

Full Package

_____ x \$59 per person before August 1, 2010

_____ x \$69 per person after August 1, 2010

Day Rate

_____ x \$49 per person (meals and sessions Friday night and Saturday - no overnight accomodations)

PAYMENT

Deposit enclosed: total # of people _____ x \$25.00 = _____

(Please send your gender breakdown, and final balance by October 1st, 2010)

Please choose one of the following payment options.

Check or Money Order enclosed for \$ _____ (US dollars only)

Electronic transfer from checking account:

_____ BANK NAME

_____ BANK TRANSIT/ROUTING NUMBER

_____ BANK ACCOUNT NUMBER

Credit Card Visa Mastercard Discover \$ _____

Name on Card _____

Account Number _____ - _____ - _____ Expiration Date ____/____

Your signature authorizes your \$25 non-refundable deposit per person.

Signature _____