

Wildacres Registration Form

September 2-5, 2011

Me, Myself and God

An adventure in exploring our relationship with God



Last Name: _____

Adult's Name: _____

Children's Names: _____

and Ages _____

Home/Cell Phone: _____

E-mail address: _____

Please indicate any special needs: i.e. first floor, handicapped, crib, dietary concerns:

Please indicate if your teenager would be willing to babysit. A modest payment for babysitting services will be given.

Temple Beth El / Non Temple Beth El Member Fee Schedule

Fees are **per person**, even if requesting double occupancy.

	<u>Temple mbr</u>	<u>Non mbr</u>
Adult (double occupancy)	\$195	\$265
Adult (single occupancy)	\$255	\$320
Child (ages 6-12)	\$125	\$160
Child (ages 3-5)	\$90	\$120

Paid at www.beth-el.com/RSVP

_____ \$100 (family deposit included - bal due August 25)

_____ Full payment included by check/credit card

credit card # _____

expiration date _____

security code _____

name on card _____



