

**2011 Retreat Payment Form**

	Two Nights (Friday-Sunday)	One Night (Friday- Saturday)	Payment
Adult Member (lodge with others attending alone)	265	189	
Adult Couple in private room with private bath	529	378	
Family of 3 or more in private room with private bath	662	473	
Family of 3 or more in room with shared bathroom	529	378	
Late Fee for registration received after April 29 (max. of \$50)	25	25	
		<b>Subtotal</b>	
		Tzedakah +	
		Early Discount -	
		Hotel Discount -	
		<b>Total Enclosed</b>	

**Deadlines:** After April 29, a late fee will be assessed for each person attending. After May 13 registration will only be accepted to fill cancellations.

**Cancellation Policy:** We are required to provide in advance a guaranteed number of participants to the Retreat Center. If you cancel **after May 13**, you will receive a refund only if another registrant takes your place. **Late fees cannot be refunded.**

Your tax-deductible donation for fellow members to...

10 % discount for early registration and payment by March 1

Discount to stay at hotel at your own expense is \$20 per night

Please make checks payable to "Adat Shalom" and send with this registration form to:  
**RETREAT c/o Adat Shalom, 7727 Persimmon Tree Lane, Bethesda, MD 20817**

**PAYMENT MUST ACCOMPANY REGISTRATION FORM**

**Member-in-Good-Standing Requirement**  
 To attend the retreat, your membership account must be current. If you have a question about your account, please contact Mike Goldsteen at 301-767-3333, x103.

**Financial Need**  
 As with all Adat Shalom programs, we do not want cost to impede participation. To arrange for a confidential fee reduction based on need, please contact Sheila Feldman at 301-767-3333, x107.

This Retreat is limited to Adat Shalom member households. Partners of members are welcome.

SEE OTHER SIDE!

**Registration for the 2011 Retreat**

**Adults**

First Name	Last Name	Email Address	Phone (Day)	Days of Retreat (check one)
				Fri/Sat/Sun    Fri/Sat
				Fri/Sat/Sun    Fri/Sat

ADDRESS \_\_\_\_\_ - \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EVENING PHONE \_\_\_\_\_

**Children**

First Name	Last Name	Age	Current Grade	8 <sup>th</sup> -12 <sup>th</sup> Grade (check one)
				Madrich    Adult Programming
				Madrich    Adult Programming
				Madrich    Adult Programming
				Madrich    Adult Programming

**Lodging selection:**

\_\_\_ Adult individual lodging with other adults attending alone. Rooms sleep have private bath.

\_\_\_ Adult couple in private room with private bath—first come, first served.

\_\_\_ Family in private room with private bath—first come, first served.

\_\_\_ Family in lodge with shared bathrooms.

Roommate preference for individuals sharing a room (please arrange before submitting this registration): \_\_\_\_\_

**Physical or other special needs** (wheelchair access, dietary, not able to use upper bunk bed, etc.): \_\_\_\_\_

**Rides offered / needed** - Please circle dates, and specify location & time:

- On May 27            I can take \_\_\_riders to the Retreat **from** \_\_\_\_\_ (area)    **at** \_\_\_\_\_ pm
- On May 28 29       I can take \_\_\_riders back from the Retreat **to** \_\_\_\_\_ (area)    **at** \_\_\_\_\_ am / pm
- On May 27            Ride needed to the Retreat for \_\_\_ people **from** \_\_\_\_\_ (area)    **at** \_\_\_\_\_ pm
- On May 28 29       Ride needed from the Retreat for \_\_\_\_\_ people **to** \_\_\_\_\_ (area)    **at** \_\_\_\_\_ am / pm

**Volunteers! Your help makes the retreat possible.** Please put checks where you can help. If more than one adult is registering, please initial.

\_\_\_ Schleppling    \_\_\_Registration On Site    \_\_\_Sat. Afternoon Activities    \_\_\_Sat. Night Entertainment    \_\_\_ Community Safety Patrol    \_\_\_Where you need me!

**THANK YOU FOR VOLUNTEERING!**

SEE OTHER SIDE!