

# SEABECK REGISTRATION

## September 25 through 27, 2009

Annual Family Weekend Retreat on Hood Canal

Fees include: Two nights group accommodations with bedding, sheets and towels furnished.  
Five meals fully prepared and served family-style in the Inn Dining Hall.

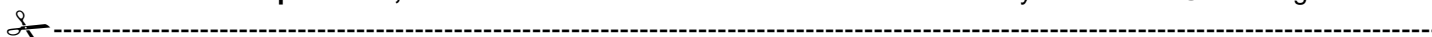
### REGISTRATION POLICIES

Seabeck Conference Center requires us to pay in full for 90% of our reservations in August. To ensure that this retreat remains self-supporting, the following registration and cancellation policies have been established:

- 1) A deposit of at least 20% of the total registration fee for individuals, families, or groups is required to reserve space at the retreat. NOTE THE FOLLOWING POLICY: **Full payment** is due no later than **Sunday, September 13, 2009**. All reservations not paid in full on or before that date will be cancelled, deposits forfeited, and the reserved space filled from the waiting list.
- 2) The waiting list will be made up **only** of registrations that are accompanied by a deposit and stamped as received in the EUUC office. Priority on the waiting list will be determined by the time of the office stamp. Telephone or email contact will not create a reservation or a place on the waiting list.
- 3) Anyone who cancels their reservation by August 15<sup>th</sup> will receive a full refund of all payments,
- 4) Anyone who cancels their reservation after August 15<sup>th</sup> will forfeit the deposit and receive a refund only if someone on the waiting list is able to replace them at the retreat.

Every effort will be made to honor room requests, but the Committee reserves the right to make final decisions as necessary to accommodate all attendees. Room assignments cannot be guaranteed.

**For questions, contact:** Seabeck Committee Chair: Vicki Curry at [seabeck@euuc.org](mailto:seabeck@euuc.org)



Adults (last name first): \_\_\_\_\_

Children (with ages): \_\_\_\_\_

Address: \_\_\_\_\_ email \_\_\_\_\_

\_\_\_\_\_ phone \_\_\_\_\_

City                      State      Zip

Seabeck can accommodate most special diets, but must know about them before your arrival.

**Each family is asked to contribute time with the child(ren)'s program on Saturday morning.**

Please circle your preference:

9:20 to 10:40                      10:30 to 11:50

Special dietary needs: (how many)

**Vegetarian:** \_\_\_ **Diabetic:** \_\_\_ **No dairy:** \_\_\_ **No Wheat:** \_\_\_

**Other:** \_\_\_\_\_

	All rooms	Building preference (if known)	TOTALS
Adults over 18 yrs.	@\$120 = \$		\$
Sr Youth group- housing	@\$82 = \$		\$
Ages 12-18 (family housing)	@\$82 = \$		\$
Children (3 to 11)	@\$52 = \$		\$
Children under 3	Free		\$
	Late fee (per adult)	after <b>Aug. 15:</b> \$10 ea.	\$
		Total Due	\$
	Payment	or deposit (min.20%)	\$
	Balance	<b>Due by Sunday, Sep. 13</b>	\$

Please send checks to: EUUC (memo: Seabeck), 8109 224<sup>th</sup> St. SW, Edmonds, WA 98026-8247.