Tacoma Christian Center ~ 2013 Women's Conference Registration Form April 26 – 28, 2013 @ INN @ Gig Harbor

\$35.00 Non-Refundable Registration Fee <u>DUE at the time of Registration</u>. *Deadline April 15th*

PLEASE PRINT	Today's Date:	
Name:		Age:
Address:		City:
Zip code:	Phone:	
Email:		
Emergency Contact Name:		
Phone:	Doctor:	
Preferred Hospital:		
Preferred Hospital: Any medical conditions we should	d be aware of:	
I hereby release Tacoma Christian Canything arise while I am attending to occur, I am fully responsible for all decision contact and I am not able to make the Do you need help with transportate Food allergies, please list: Cost & Room Request – please check [] Would like a quiet room [] I get up early []	this Conference. I agree that if medicalebt. I also authorize the Tacoma Chas necessary should they be unable to decision on my own accord. Initialition? [] Yes [] No Are you dialected ALL that apply: [] Sometimes snore [] I like to	cal charges should ristian Center Women's to reach my emergency als: cetic? stay up late
List roommates. If left blank, we		
[] 4 ladies per room (sharing 2 qu	_	35.00
[] 3 ladies per room Cost per p	person: \$160.00	
[] 2 ladies per room. (Possibly s	haring 1 king size bed) Cost per p	person: \$200.00
[] Own room – 1 person Cost:	\$335.00	
Cancellation & Refund Policy		
If you need to cancel for ANY REA deposit. Cancellations after Apri REGARDLESS IF YOU ATTEND O	I 7, 2013 WILL REQUIRE FULL PA	