Never Let Go Retreat

Registration Form

Camp Mokule'ia | November 6-8, 2015

| FAMILY/GROUP L | <u>EADER</u> | | | | | | |
|--|----------------------|------------------------|----------------|-----------|------------------------------------|---|--|
| Name: | | | | | | | |
| Phone: Email: | | | | | | | |
| Address: | | | | | | City: ST: HI Zip: | |
| ATTENDEES: Pleas | | | | | | | |
| Last Name First Name | | Age Gender Shirt | | | Size | Relationship/Notes (allergies, etc.) | |
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| | | | | | | | |
| LODGING: Please | help us plan bet | ter by in | dicating wh | nich pa | rts of th | he retreat you plan to join us for. | |
| CAMPERS* (\$150 per Person): | | | | · · | | VISITORS (\$50 per person): | |
| | | | | hey do | not req | uire a separate room. | |
| So excited!!! We are plan | | | · · | | ⊗ Sc | o bummed We are not able to stay overnight | |
| stay overnight on: | | | | | but we are planning to stop by on: | | |
| ☐ Both Nights | | | | | □ Friday (Nov. 6) | | |
| ☐ Friday Only (Nov. 6) | | | | | □ Saturday (Nov 7) | | |
| □ Saturday Only (Nov 7) *Rooms will be assigned on a first-come-first-served basis based o | | | | | □ Sunday (Nov 8) | | |
| | | | | | | | |
| MEALS: Please indicate which meals you are planning to join us for | | | | | us for. | | |
| Friday (Nov. 6) | | Meal Display (C:00 DM) | | | | Quantity | |
| | Dinner (6:00 PM) | | | | | Adult Child | |
| Saturday (Nov 7) | | Breakfast (8:00 AM) | | | | Adult Child | |
| | | Lunch | (12:00 Noo | n) | | Adult Child | |
| | | Dinner (6:00 PM) | | | | Adult Child | |
| Sunday (Nov 8) | | Breakfast (8:00 AM) | | | | Adult Child | |
| EMERGENCY CON | ITACT | | | | | | |
| | <u></u> | Relationship: | | | | Phone #: | |
| | | | | | | ks payable to "Stuart Wang". | |
| | ating in the Never I | ot Co De | troat to bo b | ماط 5ء: ا | lav Navi | ombor 6, 2015 thru Sunday November 9, 2015 of | |
| | nereby release and | indemni | fy all volunte | ers of t | he Neve | ember 6, 2015 thru Sunday November 8, 2015 at er Let Go retreat from any and all liability arising from tion in this event. | |
| Name and signatu | are of person resp | oonsible | for this reg | istratio | on (Fam | nily or group leader): | |
| | | | | | | | |
| (Please print name) | | | | | Signature and Date | | |