



Craft & Quilt
 Asbury Camp & Retreat Center
 Sept. 29 – Oct. 1, 2017

Name: _____ M/F _____

Street/City/Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Church(s): _____

Room preference: (please check one) Single Double Triple Commuter
 **(Please note that we will do our best to accommodate room preferences, however it is based on a first come first served basis.)

Name of room-mate(s) request: _____

Do you have any dietary requirements? (*food allergies, vegetarian, no sugar, low fat, etc*)

Do you have special needs that the staff should be aware of before you arrive?
 (*i.e. wheelchair accessibility, limited mobility, housing accommodations?*)

Costs:

Package A: *Friday – Saturday, All inclusive package with 1 overnight, your very own table to use, 3 fresh and healthy meals, linens, and snacks.*

\$99 for a triple room, \$115 for a double room, \$140 for a single room

Package B: *Friday – Sunday, All inclusive package with 2 overnights, your very own table to use, 5 fresh and healthy meals, linens, and snacks.*

\$155 for a triple room, \$175 for a double room, \$205 for a single room

\$85 Commuter (Commuter rate includes all meals and program.)

\$50 deposit appreciated with registration. Total included with this registration \$ _____

Choose Method of Payment: Check Visa MasterCard

(Please make all checks payable to: Upper New York Annual Conference or UNYAC)

Card # _____ - _____ - _____ - _____ Exp. Date (/) 3 Digit Security Code _____

Signature: _____

Printed Name: _____

Cardholder's Address (If different from above): _____