



**Craft & Quilt**  
 Asbury Camp & Retreat Center  
 Sept. 28 – Sept. 30, 2018

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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*)

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

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**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.*

**\$101 for a triple room, \$117 for a double room, \$143 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.*

**\$158 for a triple room, \$179 for a double room, \$210 for a single room**

**\$90 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): \_\_\_\_\_

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