

Please ensure that you have made a copy of both of these pages for your records prior to sending.
Please complete in black or blue pen only

QUILT ENCOUNTER 2017

REGISTRATION FORM

Name.....

Accommodation: Can only be allocated based on the information you provide.

Room Requests.....

My friends are.....

Extra night's accommodation please indicate:.....

Special Requirements (accommodation, diet, sewing machine, disability/medical condition etc)

.....

.....

Note: Please remember that, although every effort will be made, it may not be possible to allocate the preferred accommodation and priority will be given to participants staying the full six days.

Cancellation/Refunds

Please contact the committee as soon as possible if you need to cancel your place at Quilt Encounter. If advice of your cancellation is received prior to Friday, 16 June, a refund, excluding the deposit, will be considered. Unfortunately refunds will not apply to cancellations after 16 June, except at the discretion of the Committee.

WORKSHOP PREFERENCES It is ESSENTIAL that you give 1st, 2nd and 3rd choices as it is not always possible for everyone to have their first choice.

Day(s)		Workshop #	Workshop title
Saturday 15	1 st choice:		
	2 nd choice:		
	3 rd choice:		
Sunday 16	1 st choice:		
	2 nd choice:		
	3 rd choice:		
Monday 17	1 st choice:		
	2 nd choice:		
	3 rd choice:		
Tuesday 18	1 st choice:		
	2 nd choice:		
	3 rd choice:		
Wednesday 19	1 st choice:		
	2 nd choice:		
	3 rd choice:		
Thursday 20	1 st choice:		
	2 nd choice:		
	3 rd choice:		

If there is any additional information (e.g. medical/access issues) we should be aware of please email quiltencounter@gmail.com