



EVENT NOTICE

2010 — Advanced Registration

Short description of the event appears here.

Registrant Info:

Title: Name: Init(s): Surname:

Citizenship: American Canadian Other

Address: Apt (Suite): Home Phone:

City: Cell:

Prov/State: Email (if any):

Postal Code: FAX:

		First+Last Name:	Meal Plan (Breakfast and Lunch)		Private Room Accommodation (A = 8-Room Suite / B = 4-Room Suite) (Double = Room with Double Bed)			
			NO	YES \$80	No Thanks	Single A \$188	Single B \$228	Double \$268
Adult Participants:	<input type="checkbox"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Under-18 Participants:	<input type="checkbox"/>	<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Advanced Registration:

Festival (deposit):
(balance due on arrival)

Donation (optional):

Meal Plan:

Accommodations:

Total:

Payment By:

Credit Card (details below) Cheque (in the mail)
payable to: The United Urantia Family Festival

Card Type: Card Number:

Cardholder Name: Expiry Date (mm/yy):

3-Digit Card Verification Number:

