

ations

Please list the names of ALL persons staying on campus during the institute:

Name:	Adult or age of child:	Gender:
Name:	Adult or age of child:	Gender:
Name:	Adult or age of child:	Gender:
Name:	Adult or age of child:	Gender:
Name:	Adult or age of child:	Gender:
Name:	Adult or age of child:	Gender:

Dorm Rooms Requested

Rates include all 5 nights (Sunday-Thursday) with checkout at noon on Friday. Children under 3 yrs. old stay free, but no more than three people may stay in one dorm room. Families with one adult and two children where at least one child is 11 years old or older must sign up for two rooms.

One person in one room	Number of Rooms:	x	\$150.00	\$
Two People in one room	Number of Rooms:	x	\$175.00	\$
Three people in one room	Number of Rooms:	x	\$200.00	\$

Campground Facilities Requested

Rates include all 5 nights (Sunday-Thursday) with checkout on Friday.

Hook-up Site for Camper or Motor Home	Number of Sites:	x	\$100.00	\$
Tent Site	Number of Sites:	x	\$ 50.00	\$

H. Meal Plans

Full Meal Plan: Includes: Sunday evening Bar-B-Q, Monday-Thursday breakfast, lunch, and dinner, Friday breakfast and lunch, and Monday-Friday afternoon snacks. Children under 3 yrs. old are free.

Number of Adults:	x	\$130.00	\$
Number of Children (Ages 3-11)	x	\$ 90.00	\$
Number of adults requesting meatless meals:	Number of children requesting meatless meals:		
Number of lactose-intolerant adults:	Number of lactose-intolerant children:		

Please list any foods that cause a family member who is purchasing the full meal plan to respond with anaphylaxis:

Commuter Plan: Includes Monday – Friday lunch and afternoon snacks. Children under 3 yrs. old are free.

Number of Adults:	x	\$70.00	\$
Number of Children (Ages 3-11)	x	\$50.00	\$
Number of adults requesting meatless meals:	Number of children requesting meatless meals:		
Number of lactose-intolerant adults:	Number of lactose-intolerant children:		

Please list any foods that cause anyone in your family who is purchasing the full meal plan to respond with anaphylaxis:

Sunday Evening Bar-B-Q: Commuters and Guests not purchasing the full meal plan are asked to sign up for the Bar-B-Q in advance. Children under 3 years old are free.

_____ Number of Adults @ \$8 each:	\$
_____ Number of Children @ \$5 each:	\$

Total of Sections A-H	\$
Amount Enclosed (minimum \$50.00 registration fee)	\$
Balance Due by July 11, 2010	\$

Please make checks payable to Headwaters School of Music and the Arts

For office use only

Date Received	Date Postmarked	Amount Received	Check Number	Family Code