## 2024 WINTER RETREAT REGISTRATION FORM

## Make Check Payable to PIONEER QUILTERS' GUILD

NAME:			
ADDRESS:			
PHONE:			
EMAIL			
EMERGENCY INFORMATION			
Contact and Phone:			
Food Allergies?			
Dates Attending?			
ALL JAN 25 JAN 2	26 JAN 27	JAN 28	-
If you are sharing dates with one other poto be divided by the people sharing.	erson, please provide the	name of that person.	Arrangements for fees
NAME: (A separate registration form is re	equired for each attendee	, but ONLY one check	(.)
Volunteers are needed: Please check w	here you can help.		
Setup Takedown	Kitchen Help	Trash Runs	
Please list the person or people you wan	it to sit with:		
Mail completed form to: Valerie Price, 14 Postmarked NO sooner than December	<b>y</b> .	le, CA 95747	
SIGNATURE:		DATF:	