

'Revitalize Your Spirit' Yoga Retreat Registration Form

Saturday, December 11, 2021 - Saturday, December 18, 2021

with Stacey Millner-Collins, ERYT-500

CONTACT INFORMATION

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

EMERGENCY CONTACT & PHONE: _____

PASSPORT #: _____ EXP. DATE: _____

**PROOF OF COVID-19 VACCINATION (required): _____

**scan/copy, send to Stacey Millner-Collins at:

owner@cityyogasc.com or 1315 Glenhaven Drive, Columbia, SC 29205

ACCOMMODATION & TRAVEL INFORMATION

ROOM CHOICE:

SGL: _____ DBL: _____ TRIPLE: _____ QUAD: _____ DORM: _____

ROOMMATE NAME (if known): _____

AIRPORT SHUTTLE: YES _____ NO _____

DEC. 11TH, AIRLINE & FLIGHT #: _____ ARRIVAL TIME: _____

DEC. 18TH, AIRLINE & FLIGHT #: _____ DEPARTURE TIME: _____

PAYMENT INFORMATION

NON-REFUNDABLE DEPOSIT due with registration: 10% of total cost: \$ _____

50% of total cost due 08/01/2021: \$ _____

Remaining 40% of total cost due 11/15/2021: \$ _____

**PAYMENT METHOD: CHECK: _____ CC _____ VENMO: _____

**Mail checks to: 1315 Glenhaven Drive, Columbia, SC 29205

**For all credit card payments, please call Stacey at 803-767-8828

**Venmo at: @stacey-millner-collins