

Waterville Valley Retreat Registration Form

Location: Valley Inn. Waterville Valley, NH
Dates: Sunday, October 25th—Wednesday, October 28th

NAME: _____ PHONE: _____

ADDRESS: _____

CELL #: _____ **IMPORTANT—for emergencies

EMAIL ADDRESS: _____
Must have in order to send additional info!

EMERGENCY CONTACT NAME & NUMBER _____

COST PER PERSON- DOUBLE OCCUPANCY: \$415.00 SINGLE: \$580.00
Please note, as anticipated the new owners continue to upgrade the hotel
but costs for food and accomidations have increased \$15 since Spring

I will be sharing a room with _____
****Single supplement will apply if no roommate available**

I have the following food allergies _____

PERSONAL OR BANK CHECKS FOR FULL AMOUNT MADE OUT & SENT TO:

Before September 1st: Pamela Turner
10 Wildwood Road
Spofford, NH 03462

**Note: Our venue has become quite popular with other groups so the opportunity
to chose an "ideal" time slot is a bit tricky.**

I hope this works for those who wish to join in the fun.

Questions or concerns: call Pam at 978-505-7476