

DO NOT READ IN BETHEL MEETING

GRAND BETHEL FALL-INN

DATE _____

LOCATION _____

REGISTRATION FORM

DEADLINE: Must be Postmarked by Deadline date of _____ (NO EXCEPTIONS)

Make check payable to: **JDI Grand Bethel of Minnesota**
ONE CHECK PER BETHEL

Mail to: GRAND BETHEL GUARDIAN SECRETARY
Full payment must accompany this registration form.

Bethel # _____

Total # of Girls attending: _____

City _____

Total # of Adults attending: _____

Bethel Guardian or Adult Responsible for Registration

Name _____

Phone # _____

Address _____ City _____ State _____ Zip _____

Registration fee - Two Nights

\$ _____ per person, 3 or 4 per room _____ x \$ _____ = \$ _____

\$ _____ per person, 2 per room _____ x \$ _____ = \$ _____

\$ _____ per person, 1 per room _____ x \$ _____ = \$ _____

Registration fee - One Night Only

\$ _____ per person, 3 or 4 per room _____ x \$ _____ = \$ _____

\$ _____ per person, 2 per room _____ x \$ _____ = \$ _____

\$ _____ per person, 1 per room _____ x \$ _____ = \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

PLEASE NOTE

You are responsible for making your own room assignments or combinations. If you want to be combined with another Bethel, YOU must make these arrangements prior to sending in your registration. Single Adults: Please decide who your roommates will be before sending in your registration. If Grand Bethel is unable to group 3 or 4 per room, the additional cost must be paid by the Bethel or adult.

PLEASE MAKE YOUR ROOM ASSIGNMENTS ON THE BACK OF THIS FORM AND MAIL BEFORE DEADLINE DATE OF _____ !

Registration Fee includes:

3 meals, taxes, gratuities and overnight lodging

Bethel Guardians: There will be a fee charged for lost keys or keys not returned at time of check out.

There will be a \$25.00 late fee for all registrations received after the deadline.