

**SAN JOAQUIN VALLEY QUILTERS GUILD
ROCKIN' BOBBINS QUILT RETREAT
REGISTRATION FORM**

Please fill out this form, sign, date, and include with your deposit. **PRINT LEGIBLY.**

Name _____

Address _____ City _____ State ____ Zip _____

Email _____ Phone _____

SJVQG Member Yes _____ No _____

List who you wish to sit with? We will do our best to seat friends together.

In case of emergency, contact _____

Relationship to you _____ Phone _____

List any food allergies or dietary needs: _____

The facility is fully accessible for individuals with physical limitations.

ALL PARTICIPANTS WHO ATTEND THIS RETREAT MUST SIGN THIS LIABILITY AND INDEMNIFICATION AGREEMENT. WITHOUT YOUR SIGNATURE, YOUR REGISTRATION CANNOT BE FINALIZED.

I hereby agree to indemnify San Joaquin Valley Quilters Guild and Clovis Veterans Memorial District and to never make a claim for injury, loss, or damage to me or anyone accompanying me to SJVQG Rockin' Bobbins Quilt Retreat in Clovis, California.

SIGNATURE _____ **DATE** _____

PRINT NAME _____

For office use only:

Pd in full: Amount \$ _____ Deposit only \$ _____ Cash _____ Check #: _____ Balance due \$ _____