

2009 EFMLS Wildacres Registration

PLEASE, ONLY one person per form per session

CHECK ONE: April 17 - 23: _____ September 7 - 13: _____

Please fill out a separate registration form for each person attending and return to BARBARA EDGE, Registrar at 1639 Fowler Rd; Woodruff, SC 29388. No registration will be accepted prior to January 1, 2008. (To make it easier for the registrar and others, please do not change or revise this form. You may photocopy it as needed.)

Name (as you wish it to appear on your name badge): _____

Street: _____ City: _____ State: _____ Zip: _____

Telephone number with area code: _____ e-mail: _____

Club/Society Affiliation: _____

Fee for each session is \$345.00 per person. Deposit is \$175 per person, payable with registration. Make checks payable to "EFMLS". Balance of \$170 is due 30 days prior to start of session.

Cancellation policy: If unable to attend, fees paid will be refunded if notification is given prior to one month before the session begins. No refund will be made after that date.

Circle appropriate responses:

Have you been to Wildacres before? Yes No Is your Club sponsoring you? Yes No

Name of roommate: _____ (If none, one will be assigned).
Are you: Male Female (No single rooms are available). Are you a smoker? Yes No

Do you have any physical handicaps and / or special dietary needs? Yes No
If YES, please explain on reverse side.

Do you have material for exhibiting that you would be willing to display at Wildacres? Yes No

Do you have a skill to demonstrate or a program to share (up to 40 minutes)? Yes No

Class Pre-registration.

See EFMLS Newsletter or Website for class offerings. <www.amfed.org/efmls/wildacres.htm>
All participants must take classes.

Which of the classes being offered would you like to take? We will be preregistering you for classes you indicate. When a class is full NO others will be assigned to that class, and you will be assigned your next class choice(s). No class placement is guaranteed.

1st _____ 3rd _____

2nd _____ 4th _____

(No registrations accepted prior to January 1, 2009)

Mail to: Barbara Edge, Wildacres Registrar
1639 Fowler Rd
Woodruff, SC 29388

If you have any questions, please contact either
Barbara Edge, Registrar at <barbara.edge@gmail.com> or 864-433-1692 or
Fran Sick, Director at <ednfran@epix.net> or 570-928-8313.