

Registration Form - SisterSpace Weekend 2009

Your registration must be postmarked (dated) by August 17, 2009.

1. Fill out one form for up to 2 adult women and accompanying children. You must be requesting lodging together and will receive all registration materials at the same address.
2. Include the ages of each child or adolescent on the form. All children and adolescents under age 18 must be accompanied by an adult.

3. Please PRINT LEGIBLY and COMPLETE ALL ITEMS. Thank you.
4. **If you want to be in the same cabin (even if it's just the two of you), identify yourself with a group name. Please ensure all women within the group use the same group name and choose the same lodging preference!**

Adult #1: _____
(Last) (First)

Adult #2: _____
(Last) (First)

Child #1: _____
(Last) (First) (Age)

Child #2: _____
(Last) (First) (Age)

Child #3: _____
(Last) (First) (Age)

Street: _____

City: _____

State: _____

Zip: _____

Phone: Day: _____ Eve.: _____

Email Address: _____
(For questions, comments and updates about your Weekend registration only. We do not share our email list with any third parties!)

Check Here to be included on SisterSpace's email newsletter list.
(If you check this box, please be sure to provide your email address! You can also join the list at www.sisterspace.org)

Lodging Preference* (circle ONE: Tenting, Cabin or RV)

Tenting

Tenting areas are General, Quiet, Rowdy, or Chem Free. If you choose to tent, our registration staff will guide you to your desired area upon arrival.

Cabin (Choose One:)

Group /Family Name**: _____

- Quiet (Quiet after 11pm) Family (with children)
- General (Quiet after 1am) Wheelchair Accessible
- Rowdy (party all night) Chem-Free

RV Space is limited! Pre-approval required. No hookups!
 Please provide us with the size of your RV. _____

**We will make every effort to place you in the type of lodging you prefer.*

****Please ensure ALL women within the group use the same group name and choose the same lodging preference!**

ASL: If you need American Sign Language Interpretation, please check the box to the left.

Adult Fee Schedule — circle your fee category

All fees are **PER PERSON**

Gross Income (before taxes):	Early Bird		After July 20th	
	Tenting	Cabin	Tenting	Cabin
Over \$70,000	\$275	\$300	\$315	\$340
\$40,001 - \$70,000	\$245	\$270	\$285	\$320
\$40,000 and under	\$185	\$210	\$225	\$260

AFTER AUGUST 17, 2009:

Last Chance / Gate registration
 (contact us before coming)

\$355 \$370

Fees Paid

Adult #1 Fee (see schedule above): _____

Adult #2 Fee (see schedule above): _____

Infants (up to 2 years): _____ no fee

Total Children and Adolescents Fee
(\$60 each, Females 2-17, Males 2-7): _____ x \$60.00 = _____

Workshift Deposit
 (required for each adult and kids 12 and over) _____ x \$30.00 = _____

Send-A-Sister Fund Contribution: _____

Total Amount Enclosed: _____

Make check payable to SisterSpace of the Delaware Valley

RELEASE: I hereby release SisterSpace of the Delaware Valley, Core Committee, and Ramblewood, Inc. from any and all liability arising from my participation in the Weekend.

Signature #1 _____ Date _____

Signature #2 _____ Date _____

Each registrant MUST sign a form (parent if registrant is under 18).

Mail Completed Form and Payment To:

SisterSpace of the Delaware Valley
 P.O. Box 22476, Philadelphia, PA 19110

For Office Use Only:

Amount Paid: \$ _____ Amount Owed: \$ _____

Chk/MO #: _____ Initial: _____

Postmark Date: _____

SISTERSPACE OF THE DELAWARE VALLEY

P.O. BOX 22476, PHILADELPHIA, PA 19110 • WWW.SISTERSPACE.ORG • WWW.MYSPACE.COM/SODV • 215.546.4890

UNITED WAY OF SOUTHEASTERN PENNSYLVANIA - AGENCY CODE 10890

FOR ADDITIONAL INFORMATION ABOUT THE 2009 WEEKEND, PLEASE VISIT WWW.SISTERSPACE.ORG