

# GCDA RETREAT REGISTRATION FORM

GCDA Member Yes  No  Would you like information on joining? Yes  Registration Number \_\_\_\_\_

Have you attended previously? \_\_\_\_\_ if no how did you hear about us \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Full Address \_\_\_\_\_  
 \_\_\_\_\_

Email address \_\_\_\_\_

Room & Meals per person Friday thru Sunday (2 nights) (please circle your choice)  
 \$247 private room                      \$197 each - 2 people/room                      \$182 each - 3 people/room  
 Price includes: Friday- Continental Breakfast, Lunch & Dinner; Saturday- Breakfast, Lunch, & Banquet; Sunday- Breakfast & Lunch

\*\*\*\*\*If you are staying the weekend, take advantage of staying Thursday night for only \$30 per person. This is a great chance to socialize and set up for Friday morning class. \_\_\_\_\_yes \_\_\_\_\_no \*\*\*\*\*

Rooming with \_\_\_\_\_

\_\_\_\_\_ Check here if you have a special need: i.e. medical restriction, difficulty with stairs or walking, etc.

Your special need \_\_\_\_\_

**Registration Fee \$65.00** [\$85.00 after March 1st] Registration Fee is Non Refundable and must be paid with registration.

**All fees are to be paid in full by March 1** with no refund if you cancel after this date.

**Class & Instruction Fees:** Total class fee includes surface, supplies and class instruction.

*PLEASE CHOOSE CLASSES IN YOUR SKILL LEVEL.*

FIRST CHOICE			SECOND CHOICE		
Class #	Name of Class	Class Total Fee	Class #	Name of Class	Class Total Fee
# _____	_____	\$ _____	# _____	_____	\$ _____
# _____	_____	\$ _____	# _____	_____	\$ _____
# _____	_____	\$ _____	# _____	_____	\$ _____
# _____	_____	\$ _____	# _____	_____	\$ _____
# _____	_____	\$ _____	# _____	_____	\$ _____

No Changes can be made after March 1  
 Low enrollment of less than 5 minimum per class may be cancelled. Please pick a second choice.

**Please read the following and sign below:**

I understand that all of the buildings are smoke-free, including the lodge rooms, and that a \$100 cleaning bill will be charged to me for violating this rule. There are designated smoking areas available. I also understand that Higher Ground Conference Center is a religious funded organization and an alcohol free facility. I agree not to bring any alcohol on the premises.

\_\_\_\_\_  
 Your Signature

\_\_\_\_\_  
 Date

Make checks payable to Greater Cincinnati Decorative Artists (**GCDA**).

Please complete this form and send with your check to:

**MaryAnn Slizewski, 3131 Preserve Ln #3C, Cincinnati, OH 45239 ph: 513-245-1631 email: sophia726@aol.com**

**GCDA USE ONLY**

**PLEASE DO NOT WRITE BELOW THIS LINE**

**GCDA USE ONLY**

Housing Fee \$ \_\_\_\_\_ Registration Fee \$65.00 [\$85.00 3/1] Thurs Night \$30 Class Fee \$ \_\_\_\_\_

Member in Good Standing Credit: -\$15 ..... Total \$ \_\_\_\_\_

Check # \_\_\_\_\_ Deposit Amt. Rec'd \$ \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Balance Due \$ \_\_\_\_\_

Check # \_\_\_\_\_ Amount Rec'd \$ \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Balance Due \$ \_\_\_\_\_

Check # \_\_\_\_\_ Amount Rec'd \$ \_\_\_\_\_ Date Rec'd \_\_\_\_\_ Balance Due \$ \_\_\_\_\_