

Name			
Mailing Address			
City		State	ZIP
Email			
Phone		_	
The standard rate per student is \$1449.00, which includes the workshop, shared accommodations and all meals.			
Please make your selection:			
\$1449.00	Shared accommodations (double occupancy - two students) at the Inn, workshop and meals		
\$1749.00	Jpgrade to 'single occupancy' accommodations at the Inn, also ncludes workshop and meals		
\$2049.00	Workshop for you, also includes meals and accommodations for you and a plus-one (spouse, friend, partner, sibling, etc.)		

Roommate's name (if applicable): _____

Rates are per person and include workshop, five nights lodging, and meals. Dietary restrictions/requests should be conveyed at least two weeks prior to check-in.

Transportation costs are not included and are the responsibility of attendees. A deposit of \$250.00 is required to process your registration, of which \$50 is non-refundable. Balance in full is due by Friday, August 16, 2024.

FALL 2024 Registration Form

Waterville Valley, New Hampshire April 28 – May 3, 2024

Choose your instructor(s):

Please check availability on our website at: newenglandquiltseminars.com.

WEEK ONE:

Valerie S. Goodwin

Gloria Loughman

Ginny Radloff

Jane Sassaman

David M. Taylor

WEEK TWO:

Andrea M. Brokenshire

Sandra Mollon

Heidi Proffetty

David M. Taylor

Registrations after Friday, August 2, 2024, require immediate payment in full, of which \$250 is non-refundable. Pay your balance-due by check at any time prior to Friday, August 16, 2024 and deduct \$50.00.

There are no refunds for cancellations after Friday, August 2, 2024. You may transfer your paid reservation to another person.

A \$250 deposit is required for each workshop with registration and full payment is required by Friday, August 16, 2024.

Method of Payment:

Check (made payable to New England Quilt Seminars)

Credit Card

Name on Card: _____

Credit Card No: _____

Exp. Date _____ Sec. Code _____

Mail this form with your deposit payment to:

David Taylor dba New England Quilt Seminars, 2715 Rockford Drive, Unit 104; Fort Collins, Colorado 80525-7670

I have read and agree to the terms, conditions and cancellation deadlines.

Signature _____

Date _____

Thank you!