



Fall into Quilting Retreat

Sponsored by Pam and Phyllis
Fall 2020

Thursday, September 17 thru Sunday, September 20, 2020

Round Barn Lodge, E4830 US-14, Spring Green WI 53588

Arrive by 10am Thursday and depart by 1pm on Sunday

Lunch and Dinner Thursday - Saturday

Sunday Brunch

Have your own bed to sleep in.

Each quilter gets their own 8' table.

Quilt shop in sewing room—shop all weekend.

Special Project Quilt pattern included.

Great Door Prizes

Two Instructors

One Roommate

Price \$290

\$100 deposit at registration* will hold your spot

Limit of 30 attendees

Balance due by July 31, 2020

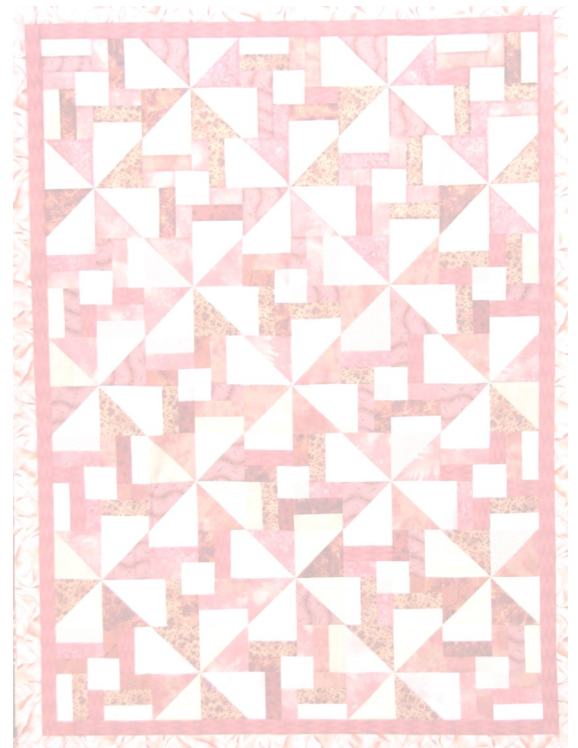
Please make checks payable to Pam See

Registration and payment can be mailed to:

Phyllis Beaver

2705 Crossway Road

Burlington, WI 53105



*Deposit is non-refundable. If you need to cancel, we will make every effort to fill your spot so you can be refunded, but we cannot guarantee it.
Cash or checks only.

Questions? Please contact

Pam See 262-442-2643 or Phyllis Beaver 262-492-2325

Download Registration Form at VanillaLatteQuilts.com, retreats page

My balance due on July 30, 2020 is: _____





Fall into Quilting Retreat Registration Form 2020

(one form per attendee)

Name: _____ On Name Tag: _____

Phone: _____

Address: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

A \$100 deposit is due at registration to hold your spot. Deposit is non-refundable unless your spot can be filled. Final payment is due by July 31, 2020, payment is nonrefundable unless your spot can be filled. Please make checks payable to Pam See, may mail payment to:

Phyllis Beaver
 2705 Crossway Road
 Burlington, WI 53105

Attendees of this retreat shall hold harmless Vanilla Latte Quilts, Pam See, Phyllis Beaver, and Round Barn Lodge from and against all claims, losses, costs and damages including but not limited to any personal injury, sickness, disease, death or personal property damage. Your signature below confirms your agreement to comply with this statement.

Check boxes that apply. Please list roommate on both registration forms.

Roommate: _____

One or more of roommates requires handicap accessible room
 (Your sleeping room will be on the same floor as the sewing room.)

Signature: _____

Date: _____

