

# SEYM Registration Form

## April 12-16, 2006

To be held at the United Methodist Life Enrichment Center, Leesburg, FL

Site Phone: 352.787.0313

**Register by Mail:** Nancy Fennell, Assistant to Registrar, 52 Fenny Bosk Trail, Venus, FL 33960

Or **Register on-line:** <www.seym.org> **Questions?** <ymg@seym.org>

**Mail check, or PAY at check-in;** Register on-line/pay on-line.

*Charge cards are NOT accepted at on-site registration.*

This Registration Form is divided into four sections: **Registration, Meals, Lodging,** and **Volunteer** choices. Please complete all sections including the volunteer portion, as this information is vital to the success of the Yearly Meeting Gathering.

**Please Note** that meal cancellations/refunds require a 72-hour notice to Registrar; SEYM pays for all reserved meals. Please email meal-change requests to: <ymg@seym.org>.

### Registration Form Part 1, Attendee Information

**Date** \_\_\_\_\_

**Last Name(s):** \_\_\_\_\_

**Have you attended YM before?** *(please mark answer)*  yes  no

**Apt # if applicable:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State/Province:** \_\_\_\_\_

**Zip/Postal Code:** \_\_\_\_\_

**Country:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Arrival day:** \_\_\_\_\_ **Approx. arrival time:** \_\_\_\_\_

**Departure day:** \_\_\_\_\_ **Approx. departure time:** \_\_\_\_\_

**Guest needing transport from airport?** \_\_\_\_\_ *Email: Carrie Driscoll <carrie.email@gmail.com>*

**Meeting Affiliation:** \_\_\_\_\_

**Organization Representative?** \_\_\_\_\_

**Organization representing:** \_\_\_\_\_

**Name Tag names** *(first and last):* \_\_\_\_\_ **Child's age/ grade:**

Name Tag names (first and last):	Child's age/ grade:

**REGISTRATION fees:**

Registration fee: Family **\$45.00**; Individual **\$35.00** \_\_\_\_\_

**After March 20, 2006, late fee: \$40.00** \_\_\_\_\_

**REGISTRATION FEE TOTAL** \$ \_\_\_\_\_ -

## SEYM Registration Form

**April 12-16, 2006**

To be held at the United Methodist Life Enrichment Center, Leesburg, FL

Site Phone: 352.787.0313

### Registration Form Part 2, MEAL CHOICES *(xxx means meal not available)*

**Note:** LEC Cafeteria Meals for **children <4 free**; Pavilion Very Simple Meals **children <10 free.**

**Please print # of meals wanted:**

	Wed	Thur	Fri	Sat	Sun	Sub-TOTALs
Kitchen use (lodge only): <b>\$3.00/day</b>						\$ -
Breakfast LEC (10-adult): <b>\$6.25</b>	xxx					\$ -
Breakfast LEC (child 4-9): <b>\$3.75</b>	xxx					\$ -
Breakfast SM (adult): <b>\$2.25</b>	xxx				xxx	\$ -
Breakfast SM (child 10-17): <b>\$1.00</b>	xxx				xxx	\$ -
Lunch LEC (10-adult): <b>\$7.85</b>	xxx					\$ -
Lunch LEC (child 4-9): <b>\$5.00</b>	xxx					\$ -
Lunch SM (adult): <b>\$3.25</b>	xxx				xxx	\$ -
Lunch SM (child 10-17): <b>\$1.00</b>	xxx				xxx	\$ -
Dinner LEC (10-adult): <b>\$9.70</b>					xxx	\$ -
Dinner LEC (child 4-9): <b>\$6.00</b>					xxx	\$ -
Walton Lecture/Dinner: <b>\$15.00</b>	xxx	xxx	xxx		xxx	\$ -
<b>MEAL TOTAL</b>						<b>\$ -</b>

### Registration Form Part 3, LODGING *(xxx means lodging not available)*

	Wed	Thur	Fri	Sat	Sun	Sub-TOTALs
LEC single per person/day: <b>\$46.20</b>					xxx	\$ -
LEC double/day: <b>\$62.00</b>					xxx	\$ -
LEC half-double per person/day: <b>\$31.00</b>					xxx	\$ -
Cot in dbl per person/day: <b>\$10.00</b>					xxx	\$ -
Group Lodges per person/day: <b>\$12.60</b>					xxx	\$ -
RV Campsite w/electric per person/day: <b>\$17.65</b>					xxx	\$ -
Tent per person/day: <b>\$6.00</b>					xxx	\$ -
Day use only (no meals/lodging) pp/day: <b>\$3.00</b>						\$ -
<b>LODGING FEE TOTAL</b>						<b>\$ -</b>

#### LODGING SPECIAL NEEDS

Ground floor: \_\_\_\_\_

Handicapped bathroom: \_\_\_\_\_

Share with NAME: \_\_\_\_\_

Wish to split costs, will share, please circle: M or F

Cannot tolerate snoring: \_\_\_\_\_

I snore: \_\_\_\_\_

#### TOTALS

<b>REGISTRATION FEE TOTAL</b>	\$	-
<b>MEALS</b>	\$	-
<b>LODGING</b>	\$	-
<b>YOUTH at YM CONTRIBUTION</b>		
<b>SEYM GENERAL FUND donation</b>		
<b>TOTAL DUE</b>	\$	-
<b>AMOUNT MAILED</b>		
<b>CHECK NUMBER</b>		
<b>AMOUNT DUE at check-in</b>	\$	-

## SEYM Registration Form

### April 12-16, 2006

To be held at the United Methodist Life Enrichment Center, Leesburg, FL

Site Phone: 352.787.0313

**Name(s):**

Phone Number:

### Registration Form Part 4, VOLUNTEER FORM *(xxx means not needed)*

**Thurs   Fri   Sat   Sun**

**Wee Friends**

*Please elaborate:*

WFriends provide activity				
WFriends lend-a-hand				
WFriends lend equipment				
WFriends assist in dining room				
Be Wfriends official sitter during Walton Lecture	xxx	xxx		xxx
WFriends assist First Day School	xxx	xxx	xxx	

**Young Friends**

YFriends help				
YFriends assist w/epistle				
Be YFriends official sitter during Walton Lecture	xxx	xxx		xxx
YFriends assist First Day School	xxx	xxx	xxx	

**Middle Teen Friends/  
Teen Friends**

Be a Friendly Presence	xxx			xxx
------------------------	-----	--	--	-----

**Intergenerational**

Assist Leader w/activity				
Count heads at swimming pool	xxx			xxx

**Other Ways to Serve**

Kids, be runners during Registration(s)				
Arrive early help w/set-up check-in				
Transport guests, be greeter				
Help check-in				
Bring bedding				
Be Buddy to special needs person				
Convene Worship Sharing				
Arrange chairs for Plenary Sessions				
Help clean-up cafeteria				
Help Simple Meals cook, clean-up				
Bring Quaker Hymnals				
Assist Audio-Visuals				
Take photos for newsletter & website				
Collect photos; make scrapbook				
Stay late Sunday for clean-up				
Assist in bookstore				
Bring musical instrument				
Medical Professional				
Bring first aid kit				
Know CPR				
Certified Lifeguard				

Instrument:

Profession:

Please note additional names and specify tasks, if more than one volunteer is listed on this form. Thanks.

**Volunteer Questions?**

Contact **Eileen Zingaro**: 727.530.7415; [ezingaro@earthlink.net](mailto:ezingaro@earthlink.net), OR **Judy Schmalstig**: 407.673.7438