

Stateline Retreat Registration 2008

December 12, 13, and 14, 2008

ALL INFORMATION IS AVAILABLE ON THE WEBSITE / PLEASE CONTACT US FOR QUESTIONS

THIS EVENT IS LIMITED TO 400 GUESTS

HOW WILL YOU KNOW IF YOUR REGISTRATION HAS BEEN ACCEPTED?

We will only deposit checks that are within the allowed number of guest all others will be returned to sender.

If all else fails send an email to aa180turn@aol.com We will respond as soon as we can.

This purchase is (NON REFUNDABLE) if you have to change your plans we will not be able to sell your ticket and refund your money. We will be happy to reassign your seat to someone you choose to take your place.

You will need to contact us two weeks in advance. A great way to reach us is via the email address on the web site www.statelineretreat.com with the change of information for the transferee.

We understand that things happen and we want to help but not at the expense of our peace of mind, last minute changes are very difficult to make during the event so please let us know early.

Room Registrations

Whiskey Pete's Hotel & Casino and is not included in the event registration although a discount code has been made available for attendees. Use the code when you make your reservation!

CODE: SCS1213

(800) 386-7867 Toll Free Room Reservation
100 West Primm Boulevard Primm, NV 89019

Registration is Not Refundable

Only forms in postmarked envelopes will be accepted
PLEASE MAKE CHECKS PAYABLE TO: **Stateline Retreat**
MAIL CHECKS AND THIS COMPLETED FORM TO:

Care of: Bob Darrall
9840 West Ann Road
Las Vegas NV 89149

Special seating requests.

Seating is assigned yet you may exchange seats. However if you wish to reserve a table of 10 for a home group, one member of the home group should contact us (aa180turn@aol.com) with the names of you home group members.

No promises can be made however we will try to make this as special as we can for you and your friends.

Handicap access is available

AFTER YOU FILL OUT THIS FORM MAKE A COPY WITH YOUR CHECK NUMBER AND DATE MAILED

Name:		
Badge Name:		Home Group:
Address:		
City:		State: Zip:
Email:		Ph:
Name:		
Badge Name:		Home Group:
Address:		
City:		State: Zip:
Email:		Ph:

Item	Price	Qty.
Reg	80.00	

Item	Price	Qty.
Reg	80.00	

WE NEED ALL THE ABOVE INFORMATION INCLUDED WITH YOUR PAYMENT
DO NOT SKIP ANY INFORMATION REQUESTED

Notes or special request
