

2019 ZEPHYR POINT QUILT CAMP APPLICATION

Name: _____ Are you a Roseville Guild Member Yes / No

Address: _____

Your Telephone Number(s): _____ Home

_____ Cell

Emergency Contact Information: _____

Relationship: _____

Telephone Number(s) _____

Who do you plan on rooming with? _____

Is this person a Roseville Guild Member: Yes No

Do you have any Medical restrictions we should be made aware? _____

Do you have any food restrictions? (Please note, there is a \$1.00 per meal surcharge for Vegan/Vegetarian)

Would you be willing to bring one of the following to share:

- ® Iron & Ironing Board;
- ® Cutting Mat

Application Number _____

Date/Time Application was received _____

Amount of Deposit: \$ _____

Check Number _____