

Arrow Rock Crazy Quilt Retreat

September 15-17, 2010

Registration

Please print or type

Name: _____

Street: _____

City: _____

State: _____ ZIP: _____

Email: _____

Whom to notify in case of emergency

Name: _____

Phone: _____

Rooming

I want a: Single room Double room

Do you have a roommate? _____

If so, who? _____

Registration closes **July 1, 2010** so we may notify teachers.

Please return this form with your registration fee of \$200.

Make check or money order payable to:

Arrow Rock Quilt Camp
P. O. Box 141
Arrow Rock, MO 65320