Music Festival 2025

800-375-6803

Serenity Mountain Retreat Dogiation F

August 7 - 10

Registration Form -	W
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serenitymtretreat@gmail.com www.serenitymountainretreat.org Name(s): ________LAST FIRST Address: STREET STATE/PROVINCE ZIP/POSTAL CODE CITY Phone: _____ E-mail: _____ Adults: ____ Children: ____ Arrive (date): _____ Depart (date): _____ Club: _____ □ Send next year's registration form \Box Do not send mail/email Please FESTIVAL REGISTRATION* **CAMPING/RV SITE FEES** \Box Thursday \$30 EA x ____ PEOPLE = \$_____ \Box Tent Site: nights x \$20 = \$ \Box Friday \$50 EA x ____ PEOPLE = \$ Tent dimensions _____ \Box Saturday \$50 EA x ____ PEOPLE = \$ _____ □ RV \$100 flat fee, Thur - Sun nights \$_____ \Box Sunday \$40 EA x PEOPLE = \$ RV or vehicle + trailer length: SUBTOTAL \$ \square RV extra nights: nights x \$25 = Discount □ IF you registered for Fri., Sat., and Sun. **ADDITIONAL GROUNDS FEES** (if you will arrive AND you are enclosing the total due before Thursday &/or depart after noon on Monday): AND you mail this before August 1st AANR/NS members x extra days x \$15 = \$THEN subtract a total of _____ others x _____ extra days x \$20 = \$ _____ \$14.00 per person -\$ **REGISTRATION TOTAL** \$ FEES TOTAL \$ Site Request: *Grounds fees are included. If you will arrive on Thursday, include Thursday's registration fee. If you will stay past noon on Friday, Saturday, or Sunday include that day's registration fee. **Amount You Have** Grand Total: \$ _____ - Enclosed (50% minimum) \$ _____ = Balance Due \$ _____ (pay Grand Total to get discount; see above) **Registration + Fees** PAYMENT □ Mastercard □ American Express □ Discover □ Check/Money Order □ Visa Check # Expiration Date: CVV2 code Signature: PRE-REGISTRATION MUST BE MADE BY MAIL. SEND THIS FORM AND PAYMENT TO: 50% DEPOSIT REQUIRED. SERENITY MOUNTAIN RETREAT 20% OF GRAND TOTAL IS NON-REFUNDABLE. PO BOX 2009, ESTACADA, OR 97023 NO-SHOWS: NO REFUND

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