



TEMPLE BETH OR CAMP RETREAT

REGISTRATION FORM

TEL: 425-259-7125 | E: office @templebethor.org | A: 3215 Lombard Ave, Everett, WA 98201

Please note that private accommodations are limited and filled on a first-come, first-served basis

PLEASE PRINT LEGIBLY AND COMPLETE ALL SECTIONS

PARTICIPANT INFORMATION HERE

1 PARTICIPANT(S) INFORMATION

1. Name (First & Last): _____

Preferred Method of Contact: _____ Age: 0-5 6-10 11-13 13-15 16-18 18+

List any Allergies & Dietary Restrictions: _____

Staying over on Saturday night?

No - or - No, but coming back on Sunday

Yes and I would like a: Shared Cabin & Bath Private Rm & Shared Bath Private Rm & Bath

2. Name (First & Last): _____

Preferred Method of Contact: _____ Age: 0-5 6-10 11-13 13-15 16-18 18+

List any Allergies & Dietary Restrictions: _____

Staying over on Saturday night?

No - or - No, but coming back on Sunday

Yes and I would like a: Shared Cabin & Bath Private Rm & Shared Bath Private Rm & Bath

3. Name (First & Last): _____

Preferred Method of Contact: _____ Age: 0-5 6-10 11-13 13-15 16-18 18+

List any Allergies & Dietary Restrictions: _____

Staying over on Saturday night?

No - or - No, but coming back on Sunday

Yes and I would like a: Shared Cabin & Bath Private Rm & Shared Bath Private Rm & Bath

4. Name (First & Last): _____

Preferred Method of Contact: _____ Age: 0-5 6-10 11-13 13-15 16-18 18+

List any Allergies & Dietary Restrictions: _____

Staying over on Saturday night?

No - or - No, but coming back on Sunday

Yes and I would like a: Shared Cabin & Bath Private Rm & Shared Bath Private Rm & Bath

5. Name (First & Last): _____

Preferred Method of Contact: _____ Age: 0-5 6-10 11-13 13-15 16-18 18+

List any Allergies & Dietary Restrictions: _____

Staying over on Saturday night?

No - or - No, but coming back on Sunday

Yes and I would like a: Shared Cabin & Bath Private Rm & Shared Bath Private Rm & Bath

next 

2

CHECK BOX FOR EACH PARTICIPANT FOR SATURDAY

PARTICIPANT NAME	Saturday Only (Includes morning goodies, lunch, dinner, smores and all activities)	
		Events & Meals <input type="checkbox"/> \$60 (Adult) <input type="checkbox"/> Free (0-18)
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	Events & Meals <input type="checkbox"/> \$60 (Adult) <input type="checkbox"/> Free (0-18)	

3

CHECK BOX FOR EACH PARTICIPANT FOR OVERNIGHT (if applicable)

PARTICIPANT NAME	Saturday Overnight (Includes lodging plus Sunday morning breakfast and programming)		
		Shared Cabin & Bath <input type="checkbox"/> \$25 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Shared Bath <input type="checkbox"/> \$30 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)
	Shared Cabin & Bath <input type="checkbox"/> \$25 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Shared Bath <input type="checkbox"/> \$30 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Private Bath <input type="checkbox"/> \$35 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)
	Shared Cabin & Bath <input type="checkbox"/> \$25 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Shared Bath <input type="checkbox"/> \$30 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Private Bath <input type="checkbox"/> \$35 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)
	Shared Cabin & Bath <input type="checkbox"/> \$25 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Shared Bath <input type="checkbox"/> \$30 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Private Bath <input type="checkbox"/> \$35 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)
	Shared Cabin & Bath <input type="checkbox"/> \$25 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Shared Bath <input type="checkbox"/> \$30 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)	Private Rm & Private Bath <input type="checkbox"/> \$35 (18+) <input type="checkbox"/> \$10 (6-18) <input type="checkbox"/> Free (0-5)


 next

4 CHECK BOX FOR EACH PARTICIPANT FOR NO SATURDAY SLEEP-OVER , RETURN ON SUNDAY

PARTICIPANT NAME	Not sleeping over but returning Sunday (Includes Sunday morning breakfast and Sunday activities)
	Events & Meals <input type="checkbox"/> \$10 (Adult) <input type="checkbox"/> \$5 (6-18) <input type="checkbox"/> Free (0-5)
	Events & Meals <input type="checkbox"/> \$10 (Adult) <input type="checkbox"/> \$5 (6-18) <input type="checkbox"/> Free (0-5)
	Events & Meals <input type="checkbox"/> \$10 (Adult) <input type="checkbox"/> \$5 (6-18) <input type="checkbox"/> Free (0-5)
	Events & Meals <input type="checkbox"/> \$10 (Adult) <input type="checkbox"/> \$5 (6-18) <input type="checkbox"/> Free (0-5)
	Events & Meals <input type="checkbox"/> \$10 (Adult) <input type="checkbox"/> \$5 (6-18) <input type="checkbox"/> Free (0-5)

FINANCIAL INFORMATION BELOW

5 TOTAL AMOUNT DUE

Add up the amount of each section on page 2 and top of page 3.

Total dollars for Saturday (section 2): \$ _____

Total dollars for Saturday Overnight (section 3): \$ _____

Total dollars for No Saturday Overnight, Sunday morning (section 4): \$ _____

TOTAL AMOUNT DUE \$ _____

PAYMENT INFORMATION BELOW

6 PAYMENT INFORMATION

- Check Enclosed** - made payable to Temple Beth Or
- Scholarship Requested** - please complete the scholarship form and include with registration
- Payment Plan Requested** - please contact Sonia Siegel-Vexler