

# Fall Retreat Registration 2019 "Gratitude & Friendsgiving...A Time of Renewal"

## 1pm Friday, November 22<sup>nd</sup> - 4pm Sunday, November 24<sup>th</sup>, 2019

A separate registration form is required for each retreatant. Married/Partnered couples complete one form.

YOU MAY SUBMIT YOUR COMPLETED REGISTRATION/DEPOSIT AT SUNDAY SERVICE INFO TABLE OR BOOKSTORE  
OR MAIL/DROP OFF AT THE UNITY OFFICE: Unity of New York, 225 W 99<sup>th</sup> Street, New York, NY 10025

### FULL PAYMENT IS DUE BY:

Friday, November 15th, 2019. Payment plan option is available - contact office for details.

### CANCELLATION/REFUND POLICY:

To receive full refund, a same-gender replacement must be available and cancellation must be made by October 15, 2019.

**NO REFUND WILL BE GIVEN AFTER OCTOBER 15, 2019.**

### PLEASE COMPLETE THE FOLLOWING INFORMATION IN FULL: (PRINT CLEARLY)

Name(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone (main): \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

### PLEASE CHECK THE FOLLOWING AS THEY APPLY:

#### ACCOMMODATIONS:

☐ I would like to share a double (shared) room @ \$499.00

If sharing a room, I would like to room with \_\_\_\_\_

☐ I would like a single room for an additional \$150.00 (Total: \$649.00)

*Please Note:* There are limited single rooms available, please check with the office for availability.

☐ I have special dietary considerations (please explain below)

Vegan ☐ Vegetarian ☐ Gluten-Free ☐ Please specify any other: \_\_\_\_\_

☐ I require handicap access (please explain) \_\_\_\_\_

#### PAYMENT METHOD:

☐ Full retreat payment enclosed

☐ Non-refundable \$100.00 deposit enclosed:

☐ Check enclosed (made payable to Unity of New York, please reference Fall Retreat)

☐ Cash (received by) \_\_\_\_\_ Date: \_\_\_\_\_

☐ Charge to Credit Card: Card#: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

☐ I would like to pay my balance with the Payment Plan. All payments plans must be paid in full by November 15, 2019

Please contact Finance Director, Ashot Yeghiazaryan at 212.560.0756, Ext. 12 to make arrangements.

Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

#### TRANSPORTATION:

**Please note:** There is a train that stops 10 minutes from the retreat center. Therefore, we will not be providing bus service to the retreat center. We will provide you with the train information in your retreat packet, which you'll receive approximately 3 weeks prior to retreat.

☐ I am driving and would be willing to share the ride with others.

Insert how many your car can carry. ☐