



Clay ConneCTion 2016

Southern Connecticut Polymer Clay Guild Inc.

Thursday, July 28 - Sunday, July 31

Registration Form

Name _____

Address _____

City State Zip _____

Phone Days _____ Phone Eves _____ Cell _____

License Plate Number and State _____

e-mail address _____

website _____

Accommodations OR Commuter Participation: Please check one

All options include use of facilities and *meals from Thursday (or Friday) supper through Sunday lunch*

Thurs - Sun ☐ \$350 Single occupancy room ☐ \$350 Double occupancy room ☐ \$230 Commuter

Friday - Sun ☐ \$285 Single occupancy room ☐ \$285 Double occupancy room ☐ \$205 Commuter

SCPCG member ☐ Please check if a SCPCG Member by April 16, 2016 for \$10.00 Discount **Linens are included**

Total \$ _____ * We now offer the option to pay with Paypal (fee is \$10) \$ _____ **Paypal Total \$** _____

I want to share a room with: _____

I am a Night Owl or an Early Bird: _____

Please list any dietary restrictions _____

Please note if you require handicap accessibility in sleeping accommodations _____

Volunteers

Please indicate any areas that you would like to volunteer for. If more than one please number in the order of your preference. Any help is greatly appreciated and it's what will make this retreat a success.

Provide demonstration. Please list demo _____

Set up ☐ Clean up ☐ Other please list: _____

Retreat Payment

Please make checks payable to: Southern Connecticut Polymer Clay Guild, Inc. or SCPCG

Include a self-addressed, business-sized envelope with 49 cents postage or confirmation will be emailed.

Send to Registration Coordinator: Sharon Mihalyak 456 Jones Hill Rd. West Haven, CT 06516-6744

* For our Paypal option Email our treasurer Sue Rankin cybersue1@earthlink.net for an invoice
OR go to our website to pay scpcg.org/meetings-events/cc16/

Written cancellations are subject to a \$30.00 processing fee. No refunds will be given after June 20, 2016

Attendance at the SCPCG Clay ConneCTion 2016 is contingent upon your agreement never to assert or make any claim for bodily injury, loss, or property damage suffered or incurred by you in attending or participating in such SCPCG Clay ConneCTion 2016 activities. All registrants MUST sign below indicating acceptance of all terms and conditions of the event. Registrations cannot be processed without this signature.

The registrant also grants permission for publication any photographs and/ or videos that may be taken during the event.

Waiver and Release Signature of Registrant _____ Date _____

We will be compiling a participant mailing list to share with fellow participants only. Please list any items that you would wish to be excluded from list. _____

We plan on having a massage therapist available for 1/2 hr and full hour massages. If you are interested in getting a massage, please indicate: Massage Y/N ☐ Half Hour ☐ Full Hour ☐ Cost \$35 / \$65 payable to massage therapist