

Registration Form – August 1-10, 2019
Young Friend's Gathering/Yearly Meeting Session

Registrants

Name	Age (if under 18)	First Time at YM?	Worship Choice (see below)

Worship Choices following Bible Study:

- | | | |
|-------------------|-----------------------|--------------------|
| 1) Chant | 3) Walking Meditation | 5) Worship Sampler |
| 2) Silent Worship | 4) Worship Fellowship | 6) Worship Study |

Registrant(s) Contact Info

Home Address: _____ Phone: _____

_____ Email: _____

Monthly Meeting Affiliation: _____

(A) Pre-Gathering Events **Select an option if you choose to participate:**

Young Friend's Gathering, August 1-4 (Your age as of July 31, 2019 _____)

Is a parent, support person or child coming with you? _____

If you are registering for the Young Friend's Gathering; indicate your meal and lodging choices but note your Gathering **costs are covered under Education & Outreach**. Only submit payment for meal and lodging fees if you attend YM Session. YFs Gathering runs Thu Aug 1 noon, to Sun Aug 4 breakfast.

Pre-YM Retreat led by John Calder, August 2-3 (Cost \$40/participant)

(B) Program/Facility Fee Charged to participants 18 years of age and older.

Registration Form Received by:	Weekly Rate	Daily Rate	# of Adults	TOTAL
June 30	\$130/week (or)	\$20/day	x	=
July 15	\$150/week (or)	\$25/day	x	=

**** Families with children: please register by July 1 to allow time to organize Youth Program.**

(C) Day Visitor Only [if applicable]

Number of days attending _____ x \$10/day/adult = \$ _____

(No overnight stay; meals purchased from cafeteria.)

(D) Lodging Indicate how many adults and youth for each night. **Ages 3 and under are free; ages 4-11 are half-price and ages 12 and older are full adult rate.** Rates are **PER PERSON PER NIGHT** with the exception of tenting which is **PER TENT**.

	Thu 1	Fri 2	Sat 3	Sun 4	Mon 5	Tue 6	Wed 7	Thu 8	Fri 9	RATE	TOTAL
SINGLE (Communal Washroom)										\$50	
SINGLE (Shared Washroom)										\$60	
DOUBLE* (Communal Washroom)										\$37	
DOUBLE (Shared Washroom)										\$44	
Tenting										\$19/tent	
*Double Rooms in this residence are BUNK BEDS. Preferred Roommate: _____										TOTAL	

Do you require a room on the lowest floor (no stairs)? ___ Yes ___ No

If you are staying offsite, please provide a contact number: _____

(E) Meals Indicate the number of adults and youth for each meal. You may mix-and-match your meals between the dining room and Food Coop.

Medically-Necessary Dietary Requirements:

___ Vegetarian Only

Allergies: _____

Dietary Condition: (ex. Celiac, Gluten-Free, Diabetic, etc.)

DINING ROOM: Ages 3 and under eat free; ages 4-11 are half-price; ages 12+ are adult rate.

	Thu 1	Fri 2	Sat 3	Sun 4	Mon 5	Tue 6	Wed 7	Thu 8	Fri 9	Sat 10	Per Meal	Total
BRK											\$ 8	
LUNCH											\$ 13	
SUPPER											\$ 17	
											TOTAL	

FOOD COOP: Ages 4 and under eat free; Ages 5-11 are \$45; Ages 12+ are adult rate.

	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	PER MEAL	WEEKLY RATE	SUB TOTAL
Breakfast									\$8	x \$110 Per Adult	
Lunch								\$8			
Supper								\$8			
										TOTAL	

(F) Donation

If you can afford to contribute money beyond your own costs, you will enable a Friend to attend who needs financial assistance. Your donation will be added to the budgeted amount for financial assistance by CYM. All donations are tax deductible and receipts will be issued in early 2020.

___ Yes, I am able to donate \$ _____

Cost Summary

RETREAT (A) (if applicable)	PROG/FAC FEE (B)	DAY VISITOR (C) (if applicable)	LODGING & MEALS (D+E)	DONATION (F) (if applicable)	Total
				Paid in Full/Deposit	
				Balance Owing	

Payment options:

___ Cheque enclosed payable to 'Canadian Yearly Meeting'

___ E-transfer to cym-office@quaker.ca **USE SECURITY ANSWER "Friends"**

___ Credit Card:

Please charge \$ _____ to my credit card for full/partial payment for Yearly Meeting Session 2019

Card type: Amex Mastercard Visa

Card Number: _____

Expiry Date: _____

Cardholder's Signature: _____

Submit this form with your payment to:

Canadian Yearly Meeting, 91A Fourth Avenue, Ottawa, ON K1S 2L1

Fax: 613-235-1753 / Email: cym-office@quaker.ca

EARLY DEADLINE: JUNE 30, 2019 - LOWEST COST

FINAL DEADLINE: JULY 15, 2019

** Cancellations received after July 15 will be refunded for Program/Facility Fee only as CYM is committed to pay for the meals and lodging we reserved based on registrations.

Child Care / Crafts / Displays / Documents in Advance

Yes, I need child care during the **Young Friends Gathering** (Aug 1-4)

Names and ages of children as of July 31, 2019: _____

Yes, I need child care during the **Pre-YM Retreat** (Aug 2-3)

Names and ages of children as of July 31, 2019: _____

Yes, I need child care during the **SPG Lecture** (Sunday night, Aug 4)

Names and ages of children as of July 31, 2019: _____

Yes, I need space in the craft sale. Number of tables: _____

Yes, I need space for a display. Number of tables: _____

Yes, I would like a printed copy (8.5" x 11") of *Documents in Advance*

Volunteer Ministry and Community Building

1) Do you have a need that you would like assistance with? (ie. mobility, hearing, medical, etc.)

2) Do you need Program Committee to rent a walker or wheelchair? Yes / No _____

3) Do you have a gift you're willing to share? (ie. singing, musician, arts/crafts, storytelling, translation?)

4) Will you require a headset during Meeting for Business due to hearing impairment? Yes / No

We encourage Friends to volunteer in **1 or 2** of the following ministries: (*Medic volunteers must have minimum of First Aid). Brief descriptions of these tasks are found in the registration material.

Adult Friend Volunteer Ministry

Clean Up Crew (Aug 10)

Daily Quacker Editor

Evening Babysitter

Medic ** _____

Minute Review Committee

Translator (French to English)

www.quaker.ca Blog Reporter

Bell Hop/Greeter/Guide

Committee of Care during YM

Doorkeeper

Family Night Helper

Meeting Room Set Up

Silent Worship Leader

Walking Meditation Leader

Youth Program Helper*

Chant Leader

Correspondence Ctte

Epistle Committee

Gleanings Committee

Microphone Walker

Technical Support

Worship Fellowship Lead

- YP Helper must submit current Police Check.

If you need financial help to attend YM Session – there are funds available.

Go to <https://quaker.ca/yearlymeetinginsession/> to access the

Application for Financial Assistance.