

| 2010 Rates (same as last year!)   |               |                |   |                              |   |
|---|---------------|----------------|---|------------------------------|---|
| Per person for entire weekend   | BAYVIEW LODGE | POOLSIDE MOTEL | VICTORIAN HOTEL w /full bath  | VICTORIAN HOTEL w /dorm bath |   |
| Sleeps  | 2-5           | 3-6            | 2-6   |                              |   |
| ADULT (18 & Up)   | 190.00        | 150.00         | 140.00  | 90.00                        |   |
| YOUTH (Age 12-17)   | 90.00         | 70.00          | 70.00   | 45.00                        |   |
| CHILD (Age 3-11)  | 43.00         | 35.00          | 35.00   | 23.00                        |   |
| CHILD (Age 0-2)   | 20.00         | 15.00          | 15.00   | 10.00                        |   |
| <b>Note:</b> There is a 50% surcharge for single occupancy rooms  |               |                |   |                              |   |
| SMALL GROUPS  | Circle one    |                | TALENT SHOW   | Circle one                   |   |
| Do you want to be in the same small group as your spouse, partner, or family member?<br><br>If you'd like to be with someone other than your spouse, please indicate name here: | Y             | N              | Please list the participants and describe the act <b>on the registration form</b> . If you are not sure, indicate "Yes" in the column to the right, and tell us later. Acts are limited to a <b>maximum of 3 minutes</b> .<br><br><b>Pre-register</b> so we can plan accordingly. ADULT ACTS ARE WELCOME!!! | Y                            | N |



JUMC Family Retreat  
Harvey Cedars, NJ  
February 26-28, 2010

**GPS: Where Are You?**

Register by Dec. 31<sup>st</sup> & receive a  
**5% discount!!**

- ❖ Rooms available on a first registered, first served basis.
- ❖ Early registration is due by December 31, 2009 to receive your 5% discount!!!
- ❖ Final registration and balance is due by January 31, 2010.
- ❖ Names and addresses are required in accordance with NJ state law.

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Primary Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_

For more information, contact Frank Malfi- home: (215) 661-8976,  
cell: (610) 220-0719. DO NOT miss this event because of financial constraints! See  
Dave Filer about scholarships. Please make all checks payable to "JUMC Retreat" &  
mail to: **Dave Filer, 452 Penn Ave., Glenside, PA 19038**

# JUMC Family Retreat

# Harvey Cedars, NJ

# February 26-28, 2010

| First & Last Name  | Bayview, Poolside, Victorian | Youth or Child (Grade/Age) | Rate                    |
|--|------------------------------|----------------------------|-------------------------|
|  |                              |                            | \$                      |
|  |                              |                            | \$                      |
|  |                              |                            | \$                      |
|  |                              |                            | \$                      |
|  |                              |                            | \$                      |
|  |                              |                            | \$                      |
|  |                              |                            | TOTAL DUE               |
| Anyone under the age of 18 must room with an adult, guardian or sponsor.   |                              |                            | \$                      |
| IF REGISTRATION IS POSTMARKED BY DEC 31, 2009, take a 5% Discount  |                              |                            | - \$                    |
| Evening babysitting is located in the Bayview Lodge and Victorian Hotels only.   |                              |                            | 50% DEPOSIT DUE NOW     |
|  |                              |                            | \$                      |
|  |                              |                            | BALANCE (DUE 1/31/2010) |
|  |                              |                            | \$                      |
| <b>SPECIAL NEEDS/TALENT SHOW ACT:</b> Indicate any special needs (dietary, handicap accessibility, etc.) and/or talent show information. |                              |                            |                         |



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