

Shabbaton/UVJC Retreat Registration Form

Adult Name(s) _____

Children Names and Ages (Please List) _____

Please list any dietary restrictions / allergies _____

Enclosed is my/our check for:

Meals	Price	X	# of People	Total
Friday & Saturday	\$25	X		
Friday Evening	\$18	X		
Saturday Only	\$20	X		
Family	\$75	X		
Non-Member	\$40	X		
Non-Member Family	\$120	X		
Accommodations				
Overnight	\$36	X		
Linen Surcharge	\$10	X		
Total				

Make checks payable to the UVJC and mail to:

Upper Valley Jewish Community (UVJC)
5 Occom Ridge Hanover, NH 03755

Questions, call (603-646-0460) or email Chris (office@uvjc.org)