

2010 JOURNEY INTO SPIRIT APPLICATION
Friday October 8 - Monday October 11

IMPORTANT:

1. Register early -- deadline is Friday September 24th. All registrations are subject to acceptance and to space limitations (attendance is limited to 20 participants).
2. Make checks payable to Society of Elder Faiths. Returned checks will be assessed a fee of \$25.
3. Registration must be prepaid, and there will be no onsite registration.
4. Sorry, but we cannot allow pets.

Please register me as (an individual form is required for each person):

- Non-member Adult at \$85 (*this event is for adults only*) SEF members \$75.

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (_____) _____ Email _____



Food preferences - PLEASE do not leave this section blank!

If you eat everything, you are an omnivore.

- Lacto-Ovo Vegetarian Vegan Omnivore Militant Carnivore
 Eat Poultry, but not Red Meat Other _____

I have the following special needs (food allergies, access to handicap facilities, etc.):

I am with the _____ party.

I realize, however, that sleeping spaces will be assigned "first-come, first-served".

Please use back of form to answer the following three questions to help us plan the retreat:

1. What other gatherings (SEF or other) have you attended?
2. What have you read pertaining to Isis?
3. What Isian rituals have you attended/performed and how often?

CONDITIONS FOR REGISTRATION AND WAIVER OF LIABILITY

- Every attendee will be expected to participate fully in the weekend's activities.
- Participants will be expected to adhere to some proscriptions of the Isiac priesthood, hence **no alcohol or other substances.**
- The retreat officially ends at 12 noon, which includes time to leave the site clean and ready for the next guests. ***Please plan to participate in cleanup of your own room and also the common areas; if you absolutely must leave before 12 noon, please arrange to complete your cleanup duties before you leave.***
- SEF reserves the right to revoke admission without refund on an individual basis if necessary due to dangerous or disruptive behavior, or failure to abide by gathering policies. I agree to hold harmless the Society of Elder Faiths, and the site owners and staff from any responsibility for personal injury or loss or damage to personal property incurred by myself.

Please check each box above to indicate that you, the undersigned, have read, understood, and agree to these conditions.

Legal name printed _____

Signature: _____ *Date signed:* _____

Mail to: Shawn Fields-Berry ~ 151 King Street #307 ~ Franklin MA 02038