

SINGLE PARENT WITH CHILD(REN) OR IF YOU PREFER SINGLE HOUSING

Please print or type clearly

Mr. Ms. Mrs. Name: _____

Name on Badge: _____ Number of Children: _____ Ages: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

REGISTRATION/HOUSING (18 years old and above)

Please note: The feast package rates below include registration, housing reservations, as well as meals for persons who will be staying at the **Embassy Suites Hotel**. Limited rooms are available.

Hotel check-in time: 4pm, Sept. 29/Hotel check-out time: 12pm, Oct. 7

This is My First Feast

Name Preferred for Hotel Reservation: _____

Check-In Date: _____

Check-Out Date: _____

	By August 18, 2017	After August 18, 2017
Registration/Housing/Meals (8-day package with 7 daily meals)	<input type="checkbox"/> \$2,250	<input type="checkbox"/> \$2,400
Registration/Housing (8-day package without meals)	<input type="checkbox"/> \$2,060	<input type="checkbox"/> \$2,210
Daily Rate/Housing/Meal (Daily rate with 1 meal)	<input type="checkbox"/> \$295 x _____ nights	<input type="checkbox"/> \$315 x _____ nights
Daily Rate/Housing (Daily rate without meal)	<input type="checkbox"/> \$270 x _____ nights	<input type="checkbox"/> \$290 x _____ nights
Early Arrival (Before September 29, 2017)	<input type="checkbox"/> \$168 x _____ nights	<input type="checkbox"/> \$168 x _____ nights

Method of Payment: Money Order(s) Cashier's Check(s) **Total Enclosed: \$** _____

REGISTRATION/MEALS ONLY (18 years old and above)

Arrival Date: _____ Departure Date: _____

	By August 18, 2017	After August 18, 2017
8-Day Registration Package	<input type="checkbox"/> \$865	<input type="checkbox"/> \$945
Daily Registration	<input type="checkbox"/> \$115 x _____ nights	<input type="checkbox"/> \$125 x _____ nights
7-Day Luncheon Package	<input type="checkbox"/> \$231	<input type="checkbox"/> \$231
Daily Luncheon	<input type="checkbox"/> \$33 x _____ days	<input type="checkbox"/> \$33 x _____ days

Method of Payment: Money Order(s) Cashier's Check(s) **Total Enclosed: \$** _____

NOTE: Cashier's checks or money orders are to be made payable to **THE FEAST COMMITTEE**. **No personal checks will be accepted.** (Checks will be promptly returned to you without notification. If the replacement money order or cashier's check is not postmarked by August 18, 2017 you must pay the regular registration rate.) **Do not mail your registration fees to The Feast Committee after September 1, 2017.**

Send this form and payment to:

**The Feast Committee
P. O. Box 1138
Seguin, TX 78156
Telephone: (210) 678-3062**