

# 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: \_\_\_\_\_

	<b>By August 17, 2018</b>	<b>After August 17, 2018</b>
<b>Registration/Housing/Meals</b> (8-day package with 7 daily meals)	<input type="checkbox"/> \$2,250	<input type="checkbox"/> \$2,400
<b>Registration/Housing</b> (8-day package without meals)	<input type="checkbox"/> \$2,100	<input type="checkbox"/> \$2,250
<b>Daily Rate/Housing/Meal</b> (Daily rate with 1 meal)	<input type="checkbox"/> \$300 x _____ nights	<input type="checkbox"/> \$320 x _____ nights
<b>Daily Rate/Housing</b> (Daily rate without meal)	<input type="checkbox"/> \$275 x _____ nights	<input type="checkbox"/> \$295 x _____ nights
<b>Early Arrival (Before September 29, 2018)</b>	<input type="checkbox"/> \$169 x _____ nights	<input type="checkbox"/> \$169 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: \_\_\_\_\_

	<b>By August 17, 2018</b>	<b>After August 17, 2018</b>
<b>8-Day Registration Package</b>	<input type="checkbox"/> \$865	<input type="checkbox"/> \$945
<b>Daily Registration</b>	<input type="checkbox"/> \$115 x _____ nights	<input type="checkbox"/> \$125 x _____ nights
<b>7-Day Luncheon Package</b>	<input type="checkbox"/> \$231	<input type="checkbox"/> \$231
<b>Daily Luncheon</b>	<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 17, 2018 you must pay the regular registration rate.) **Do not mail your registration fees to The Feast Committee after August 31, 2018.**

**Send this form and payment to:**

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