



(Community of Believers in Yah)

C.O.B.I.Y.

TABERNACLES IN N.Y.

REGISTRATION FORM Sept 29th – Oct 6th 2015
Circle Lodge
335 Sylvan Lake Rd Hopewell Junction, N.Y. 12533
WWW.TABERNACLESINNY.COM

(Please Print)

REGISTRANT'S INFORMATION						
Last name:		First:		<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	<input type="checkbox"/> Miss <input type="checkbox"/> Ms.	Marital status:
Name as you would like it to appear on name tag:						
Home address:			Apt. no.:	Phone #: ()		
P.O. box:		City:		State:	ZIP Code:	
Email:						
If you are under 13, Please indicate your age here: _____ (required information)						
Your Age Group				Dates you will be staying:		
<input type="checkbox"/> 17-Adult	<input type="checkbox"/> 12-16 years	<input type="checkbox"/> 6-11 years	<input type="checkbox"/> 2-5 years	From: 9/ /15 – To: 10/ /15		
Do you have any specific dietary needs including food allergies? If so, please explain, _____						
Which of the following would you like to participate in?						
Music Ministry:		Teaching Ministry:		Arts & Crafts Facilitators		
<input type="checkbox"/> Singing (Praise Team & Choir)		<input type="checkbox"/> Primary Class (ages 2-5)		<input type="checkbox"/> Yes, I am interested		
<input type="checkbox"/> Dance		<input type="checkbox"/> Junior Class (ages 6-11)		Sports Activity Coordination		
<input type="checkbox"/> Band (What instrument? _____)		<input type="checkbox"/> Teens Class (ages 12-16)		<input type="checkbox"/> Yes, I am interested		
<input type="checkbox"/> Sound System		<input type="checkbox"/> Young Adult Class (ages 17-20)				
Accommodations:						
Rooms/ 2-3 Persons Per Room Please list Roommate(s)		Cabins/ 2-3 Persons Per Cabin Please list Roommate(s)		Not Staying Over (Daytime Only)		
<input type="checkbox"/> _____		<input type="checkbox"/> _____				
<input type="checkbox"/> _____		<input type="checkbox"/> _____				
<input type="checkbox"/> _____		<input type="checkbox"/> _____				
Registration Deposit: May 1 st – June 15 th		Registration Deposit: May 1 st – June 15 th		Registration Deposit: May 1 st – June 15 th		
Adult <input type="checkbox"/> \$50 Junior <input type="checkbox"/> \$25 Primary <input type="checkbox"/> \$15		Adult <input type="checkbox"/> \$50 Junior <input type="checkbox"/> \$25 Primary <input type="checkbox"/> \$15		Adult <input type="checkbox"/> \$20 Junior <input type="checkbox"/> \$10 Primary <input type="checkbox"/> \$5		
Method of Payment: <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Credit Card (via paypal) <input type="checkbox"/> Savings Plan (Already Started)						

Mail completed form and payments to:

C.O.B.I.Y.
Attn: Valarie Bryan
55 Abner Place
Yonkers, N.Y. 10704

For more information visit us online at www.tabernaclesinny.com

CANCELLATION/REFUND POLICY- All deposits are final and required at the time of registration. In order for the Feast to be a blessing to everyone, we cannot provide refunds or exchanges. We cannot make any changes on a reservation after a deposit is made. This includes changing names, adding a roommate, removing a roommate, switching rooms or cabins, changing dates, changing package selections, etc. Thank you for understanding.

