

CRONES COUNSEL XXV

ANNIVERSARY JUBLIEE

October 4 – 8, 2017

The University Guest House

University of Utah

110 S Fort Douglas Blvd, SLC 84113

Reservations: 888-416-4075 or 801-587-1000

www.universityguesthouse.com



REGISTRATION FORM

Please print clearly:

NAME: _____

Name you would like to be known by if different from above _____

ADDRESS: _____

EMAIL: _____

We communicate primarily by e-mail. If you have one, please include

TELEPHONE: _____ **Cell:** _____

Emergency Contact:

Name:	Number:
--------------	----------------

BIRTH DATE: _____

We need your birthday for ceremony. Please provide.

Is this your first time? Yes__ No__ (Please let us know)

Registration Fees:

Before 2/28/17	2/29/17—9/1/17	After 9/1/17	
\$175	\$210	\$230	\$ _____
Elders (80&Over):			
Before 2/28/17	2/29/17—9/1/17	After 9/1/17	
\$160	\$195	\$210	\$ _____

In addition to my registration, I wish to support my Crone sisters with a donation to:

Outreach fund \$ _____ CC Scholarship \$ _____ Crones Counsel \$ _____

Total \$ _____

Please make check payable to CRONES COUNSEL, INC. and mail to:

Crones Counsel Registrar, c/o annie lehto, 4571 S. White Way, Littleton, CO 80127 Phone: 303-697-6016

To pay by credit card, please register online at <https://www.cronescounsel.org/registration/>

HOTEL INFORMATION

The University Guest House
University of Utah
110 S Fort Douglas Blvd, SLC 84113
\$120/night – 2 Queens or 1 King + full breakfast
Reservations: 1-888-416-4075 or 801-587-1000
www.universityquesthouse.com

Roommate: _____

If you need a roommate, contact annie at cronenancy@q.com

Grants/Scholarships:

Grant/scholarships are available on a limited basis. For information on grants/scholarships, please contact president@cronescounsel.org or info@cronescounsel.org. You may download application from our website via this page: <https://www.cronescounsel.org/registration/>

Refunds:

Cancellations up to August 1, 2017 will be given a total refund.
After August 1, 2017 there will be a \$25.00 cancellation fee.

LIABILITY WAIVER AND ASSUMPTION OF RISK AGREEMENT

WAIVER – Anyone attending a Crones Counsel gathering must sign a waiver of liability, just as you would when attending an Elder Hostel or other such event.

PLEASE SIGN AND DATE THE FOLLOWING

I have read the activity description and voluntarily enroll in the Crones Counsel gathering. I understand and realize activities involved in the program involve risks which may result in injury to me. I knowingly and voluntarily assume all such risk which I may sustain in connection with the above program, including but not limited to injury sustained while traveling on highways and over rough terrain, forces of nature, falling, slipping, and any accident or illness which may occur while I am enrolled in the program.

Furthermore, in consideration of the permission granted to me to participate in the above program, on behalf of myself, my heirs, and legal representatives, I release and discharge Crones Counsel, Inc. and its officers from liability for any injuries, property loss, or damage I may sustain while participating in the above activity. I fully realize and accept the responsibility to myself and my companions to carry out all program activities according to Crones Counsel procedures and in a safe and prudent manner. This release does not apply to acts of gross negligence or wanton and reckless conduct.

I also agree I shall be responsible for any expenses incurred, or damages suffered, as a consequence of my personal injury or property loss or damage; that I shall carry adequate accident and health insurance for this purpose; and that I shall not hold Crones Counsel, Inc. responsible for such expenses.

Signature

Date