



# ASG Appomattox Spring Retreat

May 5-10, 2019

Holiday Lake 4H Educational Center  
1267 State Route 723 Appomattox, Va.

[www.holidaylake4th.com](http://www.holidaylake4th.com)

Pack your bags and your sewing room for six days of fun, friendship, learning and sewing. Bring new projects or use this time to catch up on your UFO's (unfinished projects). You will have your own large table to use. If you have never been to the Appomattox retreat, come visit one day and have lunch (12pm) with us. We Love Visitors!

- Check-in at 4PM on Sunday, May 5<sup>th</sup>. Check out after Breakfast on Friday May 10<sup>th</sup>.
- Open registration begins on April 1 and ends April 25, 2019.
- **REFUND CAN NOT BE MADE AFTER REGISTRATION DEADLINE.**

Lodging includes your choice of Counselor Cabin (2 small bedrooms with share bath), The Cottage (3 small bedroom with shared bath) and the Bunkhouse with two rooms each with 7 bunks. Each room has a bath.

- Registration includes all meals starting with dinner on Sunday, May 5<sup>th</sup> and ending with breakfast on Friday, May 10<sup>th</sup>. Vegetarian meals and other meal plan options available upon request and should be written on your registration form.
- Options available for 3,4 or 5 nights. Accommodations are assigned on a first-come-first served basis upon receipt of registration form and check.

	<u>Bunkhouse</u>	<u>Cabin/Cottage/Clinic</u>
<b>4 Days (10meals/3 nights)</b>	<b>\$240.00</b>	<b>\$255.00</b>
<b>5 Days (13 meals/4 nights)</b>	<b>\$270.00</b>	<b>\$290.00</b>
<b>Friday Breakfast (14 meals/5 nights)</b>	<b>\$300.00</b>	<b>\$325.00</b>

- For more information contact Dianne Portwood at [dportwood1@verizon.net](mailto:dportwood1@verizon.net) or 804 737-3085



**A week to work on whatever you want!**



## ASG Spring Retreat 2019 Registration Form

Make Check payable to ASG/Richmond, Va. Chapter. Mail to Dianne Portwood 316 Southern Ct. Henrico, Va. 23075

Name: \_\_\_\_\_ ASG member? (circle one) Yes No

Address: \_\_\_\_\_

Phone (Home/work/cell): \_\_\_\_\_ E-mail: \_\_\_\_\_

Lodging Preference: (Circle one) Bunkhouse – Pod – Cottage – Clinic

Preferred Roommate: \_\_\_\_\_ Willing to share a table? No Yes

Amount enclosed: \$ \_\_\_\_\_ Dates Attending: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Meal request (vegetarian, gluten free) \_\_\_\_\_