70’s Disco Party  
SCRAPBOOK RETREAT   
Canaan Valley Resort State Park   
November 5 – 8, 2015  
  
Discover Canaan Valley Resort during this weekend of scrapbooking with family and friends. Vendors will be on hand with supplies and instruction.

Two easy steps to register:   
  
1. Fill out the registration form and return to:   
Christa Wildesen   
242 Wood Street, Westernport MD 21562   
(814) 289-6904 or cwildone@gmail.com

2. Call Canaan Valley Resort at (800) 622-4121   
and make your room reservation.  
Identify yourself as being with the Scrapbook Retreat to receive discount rates:   
  
Guest Rooms: $99 per night (single/double occupancy)   
4 Bedroom Cottage: $219 per night   
Cabins: 3 Bed $139 per night & 4 Bed $159 per night   
(tax/resort fee additional to above rates)   
  
**-$10 per person will be added for triple/quad occupancy in guest rooms.  
-Standard queen or king lodge rooms available at this rate only.  
Cottage sleeps up to 14 people. 3 Bed Cabin sleeps 5-6 people. 4 Bed Cabin sleeps 6-8 people.**

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November 5 - 8, 2015**   
Canaan Valley Resort State Park   
**Registration Form**   
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name:** | |  | | | | | | | |  | **Vendor:** | | |  | **Cropper:** | |  |
| **Address:** | | |  | | | | | **City:** | | | |  | | | | **State:** |  |
| **Zip** |  | | |  | **Phone** |  |  | | **Email** | | | |  | | | | |

**Cropper Registration Fee**: $60 per person – includes registration and facility use.   
**Vendors Only**: $60 per person  
**Vendor & Crop Registration**: $90 per person   
\*Cropping Hours: Thursday, 11/5 (5pm) through Sunday, 11/8 (12pm).

Building to be vacated by noon on Sunday   
  
**Circle below what pertains to you:**

Registration: Yes No Cost:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vendor: Yes No Cost:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Method of Payment:** Enclosed Check:\_\_\_\_\_\_\_\_\_\_ Credit Card:\_\_\_\_\_\_\_\_\_ (please check one)

**Make checks payable to Christa Wildesen**

Credit Card Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_\_\_

Signature of Card Holder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_