



TAKE FIVE

**“Handle with Care Take 5:
19th Annual
Mom’s Get Away Weekend
Registration Form**

Date: _____

Name: _____

Phone #: _____ or _____

Email: _____

Mailing Address: _____

Emergency Contact Name & Phone #: _____

Allergies (food / environmental): _____

Special dietary considerations: _____

Do you want your own cabin? NO ___ YES ___ (by checking YES, you agree to pay an additional fee of \$50)

Shared Cabin: Do you have a cabin mate(s) request? _____
(Each person has their own bedroom) (name) (name)

Do you need a ride? Yes ___ No ___ Can you offer a ride? ___ How many people? _____

Eligibility: Are you a return participant? Yes ___ No ___

Name of your son or daughter: _____

Name of your primary support worker: _____

Please make your cheque payable to: Community Living Owen Sound and District

**Mail or Deliver to: Community Living Owen Sound & District c/o Sandra McManaman
769 4th Avenue East, Owen Sound, ON. N4K 2N5**

- ✓ *Early bird Registration Fee \$35.00 (due by April 15th)*
- ✓ *Registration Fee \$50.00 for 2 Days All Inclusive May 28 & 29(Shared Cabin)*
- ✓ *Registration Fee \$100 for 2 Days All Inclusive May 28 & 29 (Own Cabin)*
- ✓ *Questions please call 519-371-9251 x 231*
- ✓ *Ask us about Respite Reimbursement ~ Limited Funds Available*

Reminder that this is a scent free and latex free& no -smoking event