

George E Mattson's 2010 SummerFest

July 30,31 Aug 1 @ Mass Maritime Academy, Buzzards Bay, MA

Please Check Program Of Choice: (Thursday night lodging available - program begins Friday)

ADULT OVERNIGHT PROGRAMS

- ___ 1. Thu, Fri, Sat Nights, **NO MEALS** \$305.00
- ___ 2. Thu, Fri, Sat Nights , **MEALS START W/ FRI BKFST** \$365.00
- ___ 3. Thu, Fri, Sat Nights, **LUNCH ONLY** \$332.00
- ___ 4. Fri ,Sat Nights, **NO MEALS** \$290.00
- ___ 5. Fri, Sat Nights, **MEALS START W/ FRI LUNCH** \$350.00
- ___ 6. Fri, Sat Nights, **LUNCH ONLY** \$317.00

*****BRING YOUR OWN LINENS*****

DAY PROGRAMS

- ___ 7. FRI, SAT, SUN, **NO LUNCH** \$200.00
- ___ 8. FRI, SAT, SUN **W/LUNCH** \$225.00
- ___ 9. SINGLE DAY TRIP, **NO LUNCH** ___ FRI ___ SAT ___ SUN . . \$100.00
- ___ 10. SINGLE DAY TRIP, **W/LUNCH** ___ FRI ___ SAT ___ SUN . . \$110.00
- ___ 11. **JUNIORFEST**-Saturday, July 25th **All Activities W/Lunch** \$ 75.00

(Minors must be accompanied by parent or guardian)

Walk-ins \$125 day...Workout only -cash only

Please Print Clearly Below:

Last Name _____ First Name _____ Male ___ Female ___

Street _____ City _____ State _____ Zip _____

Age ___ Instructor _____ Roommate _____ Shirt Size _____

Phone (____) _____ Shirt Size ___ E-Mail _____ @ _____

***\$25 Early Discount for all applications received by June 30th**

***IUKF discount until July 10th IUKF Membership # _____**

FREE LIMITED EDITION TSHIRT w/ FULL PAYMENT RECEIVED BY JULY 8TH

Programs with meals will not be available after July 15th

Meals may be purchased at dining hall [Cash only]

Registration for Thursday (July 29) participants 7pm to 10 pm

Fri thru Sunday registration starts @7:30 am.

Applications must be received by July 20th. We will not have access to our mail after that.

Method of Payment: MasterCard, Visa, Postal and Money Orders in US Dollars from US Banks

Personal checks will only be accepted until June 20th. Make checks payable to: **George E. Mattson.**

******Credit Cards are processed by Gands Consulting**** (No Refunds after July 15th)**

*** One Discount
per applicant**

Card No _____

Expiration ____/____ Security Code _____ Please add billing address if different than above

Disclaimer: I agree to release and waive any and all rights, claims, or actions that I, my heirs, successors, or assigns may have against George the. Mattson, Susan E. Sussman, IUKF, its members, Eastern arts and humanities Center, Inc. I agreed not to take any videotapes or pictures without written permission from George E. Mattson.

Date: _____ Signature of participant or parent/ guardian of minor

Mail To: G Mattson PO BOX 217, Mount Dora, FL 32756
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