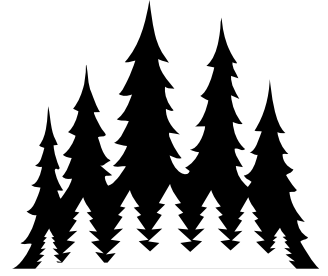


Sacramento Valley Intergroup of Overeaters Anonymous



25th Annual Tahoe Retreat
The Silver Celebration
August 13~15, 2010



WHO Members of Overeaters Anonymous only.
Attendees must register for the entire retreat and stay at the retreat center (i.e., no “day-trippers”).

WHERE South Lake Tahoe, a retreat center on the lake that has been called “A haven where God’s presence and the deep blue lake seem to drape visitors in a profound peace.” (*Chicago Tribune*)

COST \$175 per person for room and all meals (Friday dinner through Sunday lunch).
■ \$65 deposit due with registration form
■ Balance of \$110 due by July 1, 2010.
Partial scholarships will be awarded if funds are available. See registration form below for details.

ROOMS Double/triple occupancy, no single rooms. Assigned on a first-come, first-served basis, determined by the postmark on your registration envelope. Short walk or elevator ride to meeting room and dining hall.

HOW To register for this recovery-filled weekend, fill out form below and mail as directed with minimum deposit of \$65.

REFUNDS \$25 fee on all cancellations
By July 1: Refund minus \$25 fee will be issued upon notice of cancellation
After July 1: Refund minus \$25 fee will be issued after the retreat only if your vacancy can be filled from the waiting list.

CONTACTS: Registration: Judy Harper at 916.731.8307 (oatahoe10@live.com).
General: Lori Pelliccia at 916.202.8828 (oaretreat@sacvalleyoa.org).
You can also obtain registration and other information at www.sacvalleyoa.org.

✂----- Detach -----✂

SVIOA 2010 Tahoe Retreat Registration Form Please Print.

Include \$65 deposit check payable to SVIOA and mail to: OA Tahoe 2010 Retreat, 372 Florin Road, PMB 234, Sacramento, CA 95831. (Total cost: \$175; balance of \$110 due by July 1, 2010)

Name _____ Name tag, if different _____

Address _____

Best Phone Number to Contact You _____

E-Mail Address (for confirmation/information) _____

Important: Please add oatahoe10@live.com to your e-mail settings so confirmation doesn’t go to junk mail. If you do not have an e-mail address and wish to receive confirmation /information, you must enclose a self-addressed, stamped, letter-size #10 envelope with this registration.

Preferred Roommate, if known: _____

Note: Your roommate must also submit a registration form and deposit. Best to send both completed forms together as soon as possible.

- Wheelchair-accessible room needed. (All rooms are ADA- accessible)
- Special dietary needs other than vegetarian/no sugar/no flour: _____
Note: Special dietary needs can only be accommodated if they are noted here.
- Scholarship Request. Please include my name for confidential consideration for a partial scholarship (deposit not covered). Requirements for consideration: send a brief statement of need, including amount requested, and mail with this form and \$65 deposit before July 1, 2010. Scholarship recipients are required to do service at the retreat.
- I will stay for lunch on Sunday (one last opportunity for fellowship with other attendees).
- “*Service is Slimming*,” so sign me up for whatever retreat service is needed.
- Yes, I am interested in purchasing a SVIOA 25th Annual Retreat: commuter mug (under \$5) tote bag (under \$10)
(Please check box next to item(s) you would like to purchase. Price depends upon interest and quantity ordered.)