



REGISTRATION FORM

Arrival Date _____ Group Contact Name (optional) _____

First Name _____ Last Name _____

Address _____ City/State/Zip _____

Email Address _____ Phone Number _____

Check the boxes for the work area(s) you would like. If you are interested in both, write a 1 and 2 for your first and second preference inside the box.

table and office chair armchair

Please check the box(es) if you want

a separate cutting table and/or an iron and board

List any food allergies or dietary concerns _____

List your non-alcoholic beverage preference _____

Waiver, Release, and Terms of Agreement

I release Renwick Inn, Inc., its sponsors, officers, and agents of all liability, claims, lawsuits, damages, losses, costs, and expenses of any kind, including without limitations, personal injuries. Renwick Inn, Inc. is not responsible for lost or stolen goods. I may be included in photos taken for publicity purposes and my comments may be used in promotional materials. In the event of a cancellation, the non-refundable \$100 deposit may be transferred to another weekend. Balance of the rate plus state tax (6.0%) is due at check out. Your deposit acts as your waiver release. Balance may be paid at time of check out with a credit card if so desired.

Please complete this form and mail, along with \$100 deposit made payable to "Renwick Inn" to:

Renwick Inn
25657 W Renwick Road
Plainfield, IL 60544



We look forward to your visit to Renwick Inn.