



LIFESTYLE LODGE

RETREAT REGISTRATION FORM

Name: _____

Address: _____

Phone: _____

Email: _____

Surgery date (if applicable): _____

Retreat Date

**Please check dates on www.fohl.nz website and with Hamilton reception for availability*

Costs - please select check box of preferred cost option

1. Tailor Clinics patients (if not part of your package)

DEPOSIT	\$900.00 (\$500.00 non-refundable if cancellation within 10 days)
BALANCE	\$950.00 (to be paid 6 weeks prior to commencement of
TOTAL	retreat) \$1850.00

Repeat Retreat attendance: \$900.00 deposit, total cost \$1750.00

2. Tailor Clinics patients (if part of your package)

No deposit required, however if cancellation occurs within 10 days, a \$200 fee will be required to re-book new retreat dates.

3. Non-Tailor Clinics patients

DEPOSIT	\$1000.00 (\$500.00 non-refundable if cancellation within 10 days)
BALANCE	\$1100.00 (to be paid 6 weeks prior to commencement of retreat)
TOTAL	\$2100.00

Online Banking Details

Bank..... BNZ
Account 02 0316 0467790 025
Reference Last Name, Initials
Particulars..... Retreat (month)

Credit Card Payment

Name on Card _____

Card Number _____

Expiry Date _____

CVC Number _____

Amount to be deducted from account \$ _____

EFTPOS

Available at either Hamilton or Wellington clinics.

Special dietary requirements

Please select appropriate options:

Gluten Free	Dairy Free	Vegetarian / Vegan	Other

Any allergies, intolerances: _____

Any absolute dislikes: _____

Is there anything we should know about that may affect your full participation at the retreat?

Acknowledgment

The retreat is **drug, alcohol, and smoke free** both indoors and outdoors.

There is a non-refundable cancellation policy however transfer is acceptable.

Transport to and from the retreat and is your own responsibility.

Registrations will be accepted on first come/first served basis.



If for any reason the retreat is cancelled, you will be refunded the amount you have paid Tailor Clinics towards the retreat (up to \$2100.00 only).

I understand and acknowledge the above:

Signature: _____

Date: _____

To electronically add your signature to this document:

- Click on the  pen symbol.
- Select the  Sign Yourself symbol.
- Select the Add Signature + symbol.
- Backspace the pre-populated text out.
- Type in your name and select apply.
- Move the signature to the line by the word signature.

****Please Note: No booking will be confirmed until both registration form and deposit are received.***

Cancellation Policy

There is a cancellation fee of \$200.00 if you cancel or change your booking less than 5 weeks before the start date. If you cancel/change less than 10 days before the start date, you will lose your full deposit (\$500.00).

If a retreat is part of your surgery package, you are no longer required to pay a deposit, however if you do not attend without providing adequate notice (10 days), you will be required to pay \$200.00 to re-book another date.

Unfortunately, there have been a number of late cancellations and/or changes and this makes it difficult for us to plan and accommodate those who wished to attend an earlier date but are subsequently unable to organise time off at such short notice.

We thank you for your understanding.

Contact details:

Tailor Clinics, 36 Grey Street, Hamilton 3216

Email: admin@tailorclinics.co.nz

Phone: 07 859 0185 Fax: 07 859 0187