| I would like to participate in one/ both of these classes. |
|---|
| One-Shoulder Purse |
| *Note: Oklee Quilting will collect money for the kits at the retreat. |
| Massages (one hour) |

Massages (one hour)

Friday Saturday =

No thank you,I do not want a massage

*Note: The massage therapist will collect money for the massages at the retreat.



Park River Bible Camp

106 Solid Rock Circle Park River, ND 5270

Phone: 701-284-6795 Fax: 701-284-6796 E-mail: info@parkriverbiblecamp.org Park River Bible Camp 106 Solid Rock Circle

Park River, ND 58270

Shhhhh...
Quilters
Secret

Spring Quilting Retreat March 20-22, 2020





Classes

Oklee Quilting will be our vendor and will teach 3 classes and have a table set up with supplies and fabrics! Payments to be made to Oklee Quilting.

One-Shoulder Purse— Make this super cute purse with Oklee Quilting! Kit is \$14



Perfect Square Block— Learn how to make a perfect square block with no dog ears!



Using your 60° triangle ruler— Oklee Quilting will teach you how to use your 60° ruler to make hombre prints.

Registration Information

The cost for the retreat is \$125, which includes overnight lodging, four meals and continental breakfast, This fee also includes a \$40 non-refundable deposit.

To register, <u>please send a check with the deposit</u> and this completed form (front and back) to:

Park River Bible Camp 106 Solid Rock Circle Park River, ND 58270

OR.....

Register online at www.parkriverbiblecamp.org and click register in the upper right hand corner!

Camp Checklist......Don't Forget!

- Bedding (sleeping bag and pillow or sheets and blankets for a twin bed.)
- Towel and washcloth
- Person items (shampoo, Soap, toothpaste, toothbrush, etc.)
- Comfy clothes and pajamas
- Desk lamp and extension cord
- Coffee cup or drink mug
- A snack to share
- Projects to work on
- Quilting supplies

Registration Form March 20-22, 2020

Registration starts at 1pm on Friday

Please print legibly!

| Name: |
|--------------------------------|
| Address: |
| City: |
| State: Zip: |
| Phone #: |
| Email: |
| Food Allergies: |
| |
| Are you sleeping overnight at |
| PRBC? |
| Yes No |
| Roommate Preference: |
| |
| Do you need special sleeping |
| arrangements? (please explain) |
| |
| |