

Welsh Heritage Week Registration Form

July 22-29, 2007 * Edgewood College * Madison, WI

Name _____ e-mail _____

Address _____ CELL PHONE _____

City, State _____ Zip Code _____ Telephone _____

Emergency Contact Information:

Name _____ Telephone _____

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Residents: Includes all accommodation, all meals, and all course fees, unless otherwise noted.

You may select a double rate if you wish to room with another individual; if no roommate is indicated, one will be provided based on availability.

Double (member) \$845 X _____ = \$ _____ Double (non-member) \$875 X _____ = \$ _____

Single (member) \$945 X _____ = \$ _____ Single (non-member) \$975 X _____ = \$ _____

(If applicable) I prefer to room with _____

Commuters: Includes complete daytime and evening program with lunch and dinner; does not include accommodation.

Full-time commuter w/meals (member) \$545 X _____ = \$ _____ without meals \$445 X _____ = \$ _____

Full-time commuter w/meals (non-member) \$575 X _____ = \$ _____ w/o meals (non-member) \$475 X _____ = \$ _____

Part-timers: Local individuals wishing to take only one or two classes can register and pay for only those classes.

Fee is per class and does not include accommodation or meals. Evening programs are included.

Part-time (member) \$100 per class X _____ = \$ _____ (non-member) \$130 per class X _____ = \$ _____

Please indicate which class(es) _____

Weekend or partial week: Double \$120 per day with meals Single \$130 per day with meals

Note: See brochure for the WHW cancellation and refund policy. We highly recommend getting trip insurance to cover any potential loss of fees.

* * * * *

Day trip Saturday, July 21 Double \$150.00 x _____ = \$ _____ Single \$200.00 x _____ = \$ _____

* * * * *

Join the Welsh Harp & Heritage Society New Renewal

\$20 Individual \$30 Family \$50 Sponsor \$100 Patron

* * * * *

TOTAL DUE: \$ _____ Please make check payable to WELSH HERITAGE WEEK.

Amount Enclosed: _____ Deposit only / Payment in full

BALANCE DUE: _____ (Balance due by June 30, 2006.)

* * * * *

PLEASE SEND THIS COMPLETED FORM AND ALL PAYMENTS TO:
Danny Proud, Treasurer, 114 Glen Highway, Madison, WI 53705

Please fill in both sides of this form.

Welsh Heritage Week Registration Form, cont.

Daily Class Schedule: Please mark the classes in which you want to participate.
(if more than one participant, please write name next to class)

7 a.m. – 8 a.m.	Breakfast		
8 a.m. – 8:15 a.m.	Announcements		
8:20 a.m. – 10:30 a.m.	<input type="checkbox"/> Language Class (<i>Please complete questions 1 and 2 below.</i>)		
10:35 a.m. – noon	<input type="checkbox"/> Ysgol Gân (Hymn Singing Class)		
noon – 1 p.m.	Lunch		
1:05 p.m. – 2 p.m.	<input type="checkbox"/> Harp – Level 2	<input type="checkbox"/> Welsh Folk Singing	
2:05 p.m. – 3 p.m.	<input type="checkbox"/> Harp – Level 1	<input type="checkbox"/> Welsh Literature	
3:05 p.m. – 4 p.m.	<input type="checkbox"/> Folk Dance – Level 1	<input type="checkbox"/> Mwy o Gymraeg (More Welsh)	<input type="checkbox"/> Session Band – all instruments welcome
4:05 p.m. – 5 p.m.	<input type="checkbox"/> Folk Dance – Level 2		
4:30 p.m. – 6 p.m.	Dinner		

1. Your knowledge of the Welsh language: [Check a box and/or write explanation on the lines.]

- | | | |
|---|--|---|
| <input type="checkbox"/> Absolutely none | <input type="checkbox"/> Know some words | <input type="checkbox"/> Know lots of words |
| <input type="checkbox"/> Can make sentences | <input type="checkbox"/> Can carry on conversation | <input type="checkbox"/> Fluent |

2. I have foreign language experience other than Welsh. _____

3. I am interested in a rental harp, if available. I understand there will be an additional fee.

4. **Private Lessons:** [Please list choice of teachers and/or type of lessons.]

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How did you hear about Welsh Heritage Week? _____

Would you like to make a donation to Welsh Heritage Week? \$ _____

* * * * *

Please fill in both sides of this form.