



REGISTRATION FORM

The Firs Noel, SATURDAY, December 1, 2018

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Home Phone () _____ Other Phone () _____

E-mail _____

How did you hear about The Firs? _____

I would like to reserve:

- # _____ \$129....B&B and Dinner - Private Cabin & Bath, linens provided (*Couple*)*
 *Please check here, if you need more than one bed (# of beds needed: _____)
- # _____ \$67....B&B and Dinner - Private Cabin & Bath, linens provided (*Single*)
- # _____ \$33....Dinner & Entertainment only (*Price per person*)
- # _____ \$36....Friday B&B (*Price per person*)

B&B Roommate(s) (*roommates must request each other*) _____

Payment Method:

Check or Money Order enclosed: \$ _____ in US Funds

Please Charge my: Visa MasterCard (*payment in full required for Visa/MC*)

Exp. Date _____ EIN # _____ Card Number _____

Cardholder's Printed Name _____

Cardholder's Signature _____

Cardholder's Mailing Address _____

Please mail completed Registration Form & payment in US Funds to:

**The Firs
4605 Cable Street
Bellingham, WA 98229**

FOR OFFICE USE		Ttl Fee _____
Dt Rcvd _____	Cnfrm Dt _____	Dpt #1 _____
Initials _____	AR # _____	Bal Due _____
Rcpt Dt _____	Fee _____	Dpt #2 _____
Hsng _____	Ext _____	Bal Due _____