

Registration Form for Breitenbush Herbal Conference 2005  
 To register, send this form, payment in U.S. dollars, check payable to Trillium Botanicals  
 and a Self Addressed Stamped Envelope to:  
 Breitenbush Herbal Conference  
 4117 SE Division St #451 Portland, OR 97202

Your Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Registration Rates**

Includes attendance to Conference Workshops and activities:

Please circle one:	Early (until May 31)	Regular (June 1 - Aug. 15)	Late (after Aug. 16)
Full Conference (Thurs. - Sun.) All seven sessions	\$ 235	\$ 260	\$ 280
Friday eve - Sunday only Sessions 3 - 7	\$ 145	\$ 160	\$ 175
Thursday - Friday only Sessions 1 & 2	\$ 90	\$ 100	\$ 105

Please write your Conference Fee
\$

**Lodging Rates**

Includes meals, lodging and Hot springs.

*Lodging is required at Breitenbush Hot Springs in order to attend the conference.*

*No day passes are allowed, during the conference.*

Please circle one:	Full Conference (Thurs. - Sun.) All seven sessions	Fri. eve - Sun. only Sessions 3 - 7	Thurs. - Fri. only Sessions 1 & 2
Cabin (w/ private bathroom) Very limited - call for availability. <b>SOLD OUT</b>	<del>\$ 283</del>	<del>\$ 192</del>	<del>\$ 91</del>
Cabin	\$ 238	\$ 162	\$ 76
Camping - Breitenbush wall-tent or lodge room Very limited - call for availability.	\$ 178	\$ 122	\$ 56
Camping (own tent) Very limited - call for availability. No R.V.'s Please.	\$ 148	\$ 102	\$ 46

Please write your Lodging Fee
\$

**Children**

Children (age 3-15) \$25 each (PER NIGHT)

Children's Names: \_\_\_\_\_

Ages: \_\_\_\_\_

Special Diet:  Vegan (Dairy & Egg free)  Wheat free

**Cancellation Policy**

\$75 of your registration fee is non-refundable/non-transferable after July 1st.

After August 1st no refunds are available.

Total enclosed: \$ \_\_\_\_\_ Please make your check payable to Trillium Botanicals

Credit Card:  Visa  MasterCard

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

I authorize Trillium Botanicals to charge my credit card in the amounts checked above. I understand the cancellation policy above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please write your Children's Fee
\$

Your Total Fee
\$