



AHVMA

e: office@ahvma.org . p: 410.569.0795 f: 410.569.2346

2022 Connections Retreat

Time to connect self, source & colleagues

(please print – use blue or black ink)

The 2022 AHVMA Connections Retreat will be held BEFORE the 2022 AHVMA Annual Conference from September 6 – 9, 2022 at Our Lady of Florida Spiritual Retreat Center in North Palm Beach, Florida.

2022 RETREAT REGISTRATION INCLUDES

- Three-day weekday retreat – arriving Tuesday and departing Friday
- Meals beginning with dinner on the night of arrival and ending with breakfast the day of departure
- Discussions and Workshops including:
- Meditation/Reflections from a variety of cultures/practices
 - Drumming Journal/Spirit Animal, Animal Totem, Native American Wisdom, Interplay
 - Awaken all the senses through movement and other sensory experiences
 - Enjoy time to relax with old and new like-minded friends

PRE-REGISTRATION IS REQUIRED. REGISTRATION DEADLINE: JULY 1, 2022 | 4PM EASTERN

**ALL pages must be complete - each attendee must submit their own registration packet
registrations with incomplete or missing information will not be processed.**

| | | | |
|---|-------|----------------|--|
| Today's date: | | | |
| ATTENDEE CONTACT INFORMATION | | | |
| Attendee's last name: | | first name: | <input type="checkbox"/> DVM <input type="checkbox"/> VMD <input type="checkbox"/> N/A |
| | | | Are you an AHVMA member? <input type="checkbox"/> yes <input type="checkbox"/> no |
| Street address: | | Home phone no: | |
| PO box: | City: | State: | Postal/Zip code: |
| * ALL Retreat Attendees must provide a mobile phone number: Mobile phone: | | | |
| * ALL Retreat Attendees must provide a valid email address: Email address: | | | |

I hold a CURRENT First Aid and CPR certification. Expires: _____

Guests are required to complete a SEPARATE registration form. ONE registration form PER ATTENDEE.

MORE ABOUT YOU

| | |
|-----------------|--|
| Mobility | Please indicate if you have any mobility/disability concerns. <input type="checkbox"/> I have no mobility/disability concerns <input type="checkbox"/> I have concerns, please see below. |
| Dietary | Please indicate if you have any special dietary requirements (food allergies, etc.) <input type="checkbox"/> I have no special dietary requirements <input type="checkbox"/> I have special food requirements/allergies, please see below If you have food allergies, please describe here: We will be sharing your comments with Our Lady of Florida Retreat Center. Every reasonable effort will be made to accommodate individuals with medically necessary dietary restrictions. We cannot guarantee that every request can be honored or that every allergy can be avoided. If you have numerous and severe restrictions you may wish to make arrangements to ensure your safety and well being. |

EMERGENCY CONTACT (WHO WILL NOT BE AT THE RETREAT)

IN CASE OF EMERGENCY, PLEASE CONTACT

| | | |
|------------------------------------|----------------|----------------|
| Name of friend or relative: | Relationship: | |
| Emergency contact mobile phone no: | Home phone no: | Work phone no: |

***All retreat attendees must list an emergency contact. Your registration will not be processed with out this information.*

LODGING INFORMATION

All sleeping rooms are "jack and jill". Each sleeping room is furnished with one full size bed. Two sleeping rooms share one bathroom between the two rooms. If registrants wish to share one room the rate remains the same (\$550.00) per person.

Please select from the options below. Be sure to indicate if you wish to share a room, or if you have preferred neighbor for your adjoining room.

- I have a preferred adjoining room neighbor (who will register or has already registered for the retreat).
 Name of neighbor: _____
- I will be SHARING one sleeping room (please note, all rooms have one full size bed).
 Name of roommate: _____
- I would like my own sleeping room, and have no adjoining room neighbor preference.

RETREAT REGISTRATION TOTAL DUE: \$550.00

**(optional) I would like to include a donation to AHVMA in the amount of: _____*

PAYMENT METHOD

| | |
|---|---|
| <input type="checkbox"/> Check# _____ (drawn from a US BANK - payable to AHVMA) | TOTAL Amount: |
| CREDIT CARD INFORMATION ↓ | <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> American Express |
| credit card number: | exp: (mm/yy) |
| name on credit card (please print) | CVV code: billing postal/zip code: |

card holder signature

date



** Waiver of Liability **

By registering for and attending the AHVMA Annual Retreat, you, on behalf of yourself and your guests (including, without limitation, family members) ("Guests"), assume all risks associated with your attendance and participation in all on- and off-site activities that are part of or affiliated with the AHVMA Retreat. By registering for this event, you, on behalf of yourself and your Guests agree to indemnify, defend, and hold harmless, AHVMA, its officers, directors, employees, and agents from all loss, damages, costs, expenses (including reasonable attorney's fees) or liability arising out of related attendance and participation at the AHVMA Retreat by your and your Guests, including without limitation, personal injury (including death) or any damage caused by you or any of your guests to any venue utilized by AHVMA for the Retreat, or your failure to comply with the applicable law or rules and regulations of Our Lady of Florida Retreat Center.

TO THE FULLEST EXTENT POSSIBLE BY LAW, I, ON BEHALF OF MYSELF AND MY GUESTS, DO HEREBY RELEASE, ACQUIT AND FOREVER DISCHARGE THE AMERICAN HOLISTIC VETERINARY MEDICAL ASSOCIATION, ITS OFFICERS, DIRECTORS, EMPLOYEES, INSURERS AND AGENTS OF AND FROM ANY AND ALL MANNER OF CHARGES, CLAIMS, ACTIONS, RIGHTS, DEMANDS, DEBTS, LIABILITY, FOR ATTORNEYS' FEES, DAMAGES OF ANY KIND AND NATURE WHATSOEVER, IN LAW OR EQUITY, INCLUDING BUT NOT LIMITED TO CLAIMS FOR PROPERTY DAMAGE AND/OR BODILY INJURY, RIGHTS RELATED TO PRIVACY OR MISAPPROPRIATION OF IMAGE LIKENESS, EVEN IF CAUSED BY NEGLIGENCE OR GROSS NEGLIGENCE, ARISING OUT OF ACTS OF THE AMERICAN HOLISTIC VETERINARY MEDICAL ASSOCIATION, ITS AGENTS, OFFICERS, CONTRACTORS OR EMPLOYEES THAT MAY ARISE OR OCCUR IN CONNECTION WITH OR AS A RESULT OF ATTENDING THE AHVMA ANNUAL RETREAT.

** Photography/Video/Recording Release **

AHVMA has photographers/videographers for its events that are authorized by AHVMA to take photos, videos, or make other recordings ("Recordings") of attendees at AHVMA events, or of people participating in functions or activities related to these events. AHVMA may use these Recordings in the future for any purpose, including without limitation, commercial, marketing, publicity, promotions, advertising, educational, or other purposes. By registering for the Retreat or any AHVMA event, you, on behalf of yourself and your Guests, expressly consent and agree to allow AHVMA to make and use Recordings, which may include you, your family members or other Guests (including individuals under the age of 18), in all media formats worldwide for whatever purposes AHVMA deems appropriate. You acknowledge and agree that AHVMA shall own all intellectual property rights, if any, arising in connection with the Recordings, and that neither yourself nor your Guests or children shall receive (or be entitled to receive) any royalties or other compensation from AHVMA for any use of Recordings.

** Harassment Policy **

The AHVMA is dedicated to providing a harassment-free experience for everyone, regardless of gender, gender identity and expression, sexual orientation, disability, physical appearance, body size, race, ethnicity, age or religion. We do not tolerate harassment of event participants in any form. Retreat participants and/or their Guests violating these rules may be expelled from the Retreat at the discretion of the event organizers.

** Registration **

Space will NOT BE HELD without completed registration form, waiver and payment. Request to attend the retreat does not guarantee your registration to this event. Space for the 2022 AHVMA Retreat is limited. Registration is on a first come first served basis, based on availability.

There will be NO onsite registrations or single day registrations. Only fully registered individuals will be permitted on the retreat property. Violators of this policy will be invoiced for the full retreat cost, plus fifty percent (50%) penalty and prohibited from registering for or attending future AHVMA Retreats and events until invoice is paid in full.

All Retreat attendees are required to submit this waiver to the AHVMA office as part of their registration. Registration & waivers must be received by: **JULY 25, 2022**. AHVMA reserves the right to cancel any registration, without refund, for any attendee who fails to provide a completed waiver by this deadline.

Cancellations must be submitted in writing to the AHVMA Office. Written cancellations submitted on or before Friday, **May 27, 2022** are eligible for a full refund, less a \$50.00 administrative fee per registrant. Any cancellations received after May 27, 2022 are not eligible for refund.

You will receive email confirmation of your Retreat registration from the AHVMA Office

* By registering and checking the box, I hereby acknowledge that I have read and understand these instructions and policies.

*registrant name (printed)

*registrant signature

*date

Where & When

**Our Lady of Florida Spiritual Retreat Center
North Palm Beach, Florida**

September 6 – 9, 2022 (immediately before the 2022 AHVMA Annual Conference)

Registration

Retreat registration is honored on a first come, first served basis, based on availability. Space is limited. Only completed registrations, with accompanying payment and properly completed AHVMA Retreat Waiver will be processed. Single day registrations and onsite registrations are not permitted.

Forms must be received by July 1, 2022.

Space will **NOT** be held without appropriately submitted registration materials.

Please include:

- Registration form with preferred payment method
- Signed retreat waiver

Rates:

\$550.00 per person

All sleeping rooms are “jack and jill” style. Each sleeping room is furnished with one (1) full size bed. Two sleeping rooms share a bathroom between the two rooms.

If registrants wish to share one room the rate remains the same per person.

Please indicate if you wish to share a room, or if you have preferred neighbor for your adjoining room.

All registrations will be processed on a first come first, served basis. If we need to add additional lodging options (due to increased registration) the additional lodging may be at a higher rate. Please register early to ensure you will receive currently published rates. Registration fee includes lodging, meals, administrative and facility costs, activities and speaker fees.

Waiver:

AHVMA has the right to cancel (without refund) any registration that does not have with it the required AHVMA Retreat Waiver. Signed waivers are to be submitted to the AHVMA office at the time of registration, and no later than

July 25, 2022.

No one will be allowed to participate without a signed waiver.

Cancellation Policy

Cancellations must be submitted in writing to the AHVMA Office. Written cancellations submitted on or before Friday, May 27, 2022 (4pm Eastern) are eligible for a full refund, less a \$50.00 administrative fee per registrant. Any cancellations received after May 27, 2022 (4pm Eastern) are not eligible for a refund.

*** CONFIRMATION***

The AHVMA Office will send confirmation VIA EMAIL within 3 business days of receipt of complete registration, payment, and waiver.

If you have submitted your registration, waiver, and payment and have not received your confirmation, or heard from us within 3 business days, call us at 410-569-0795 to verify we have received your information.

Ready to Register?

Submit completed registration via email, fax or postal mail to the AHVMA Office

Registration with accompanying **waiver** must be received by **July 1**

EMAIL:

office@ahvma.org

SUBJECT:

2022 RETREAT - <your last name>



FAX:

410.569.2346

SUBJECT:

2022 RETREAT - <your last name>



MAIL:

AHVMA

ATTN: Melissa Kellagher - 2022 Retreat

PO BOX 630

Abingdon, MD 21009



Please verify you have properly completed ALL sections of your registration forms.

Incomplete registrations will not be processed. Space will not be held without payment.