



OVEREATERS ANONYMOUS
North Cascade Intergroup – Spring Retreat



Accentuate the Positive!

April 3-5, 2020
Camp Casey Conference Center
Whidbey Island, Coupeville, WA

Early registration until March 13th - \$135 US
Postmarked after March 13th - \$145 US
Saturday only Commuter (includes Lunch & Dinner) - \$65 US

(NEW - Online registration & payment available at oa-nci.org/annualspringretreat2020)

All registrations must be received and paid in full by March 27th

No payments at the door. Payment in US funds only. If you are outside the US, please register online. Registration and payment can be made online with PayPal at oa-nci.org/annualspringretreat2020 or mail registration below with payment to:

North Cascade Intergroup - Attn: Tracy Kish
PO Box 2511, Everett, WA 98213

Make Checks Payable to: North Cascade Intergroup

No refunds, but if there is an emergencies please contact us by phone or email by March 27th

Scholarships:

Partial scholarships for overnight registration may be available from NCI (\$65.00). Complete registration form and send with \$70.00 deposit; check scholarship box below. Scholarship requests must be **received by March 13th**.

For questions please contact: Tracy at 425-314-8398 or oanci100@gmail.com

*The "We Care" list is made available to all attendees during the retreat. If you WANT your name and/or telephone number and/or email contact listed, **indicate by circling the appropriate "Yes" below**. Otherwise, you will NOT be on the list. NCI is not responsible for what attendees do with the list.

Registering for: Full Retreat Saturday Commuter Scholarship Request \$ _____

I wish to contribute an additional amount to help fund scholarships for others: \$ _____

Name: _____ On "we care" list? Yes*

Address: _____

City, State/Prov: _____ Zip: _____

Telephone (_____) _____ On "we care" list? Yes*

E-mail (for confirmation package): _____ On "we care" list? Yes*

Roommate (both registrants must indicate each other): _____

Help us help you (**circle if "yes"**): Male or female? Vegetarian or vegan? Unable to climb stairs? Do you snore? Use CPAP?

Other notes: _____