



REGISTRATION FORM

** indicates required items*

Name*

Mailing Address*

Phone Number*

Email Address*

Birthdate*

Emergency Contact*

How did you hear about us?*

- newspaper
- radio
- flyer
- magazine article
- other:

- friend
- website
- facebook
- church

What are you most interested about while attending this retreat?*

Please share the name of your spouse, how they died, and when.*

Have you participated in any supportive grief groups or counseling? If so, how long and briefly describe your experience.*

Please share what you are doing for yourself to support your healing and personal well being? (i.e., social and emotional support, physical activity, etc.)*

Our retreats offer wholesome vegetarian based meals. Are there any dietary or physical considerations that will help us make your experience more enjoyable?*

What other information would be helpful for us to know about you?

TERMS and CONDITIONS:

Participation Liability Waiver

I agree that neither Sweet Fragrance Retreat nor its agents, employees, board members, contractors, and/or volunteers associated with the Sweet Fragrance Retreat activities shall be held responsible for any injuries or damages that occur while I travel to or from such Sweet Fragrance Retreat activities or during the time I am in attendance at or participating in the Sweet Fragrance Retreat activities. I do hereby hold harmless Sweet Fragrance Retreat, its program officers, trustees, board members, employees, and volunteers against any and all liability, damage, loss, claims, or demands which arise out of or are in any way connected with my travel to and from, attendance at or participation in the Sweet Fragrance Retreat activities and retreats. I understand that the retreats are tobacco-free and do not tolerate illegal drug use unless prescribed by a physician and listed in my medical history inquiry. Any violation of this rule will result in expulsion from the event.

I hereby authorize any Sweet Fragrance Retreat program officers, trustees, board members, employees, or volunteers to consent to emergency medical treatment as necessary for my health and safety. I further agree that no Sweet Fragrance Retreat program officer, trustees, board member, employee, or volunteer will be held responsible for injuries or damages arising from the provision of any such emergency medical treatment. I also authorize the treating medical institution and/or medical providers to hospitalize and administer the appropriate treatment deemed medically necessary for me. I do hereby agree to indemnify and hold harmless Sweet Fragrance Retreat and any program officer, trustees, board member, employee, or volunteer from any and all liability, damage, loss, claims, or demands and actions of any nature whatsoever, including attorneys' fees, which arise out of or are in any way connected with the provision of such emergency medical services.

Media Consent

I give Sweet Fragrance Retreat permission to use any media including my image or video to appear in photographs, pictures, and visual for TV, radio, print media, newsletter, brochure, press release, program album, or website resulting from attending the Sweet Fragrance Retreat event and retreat.

Payment and Cancellation Policy

- Sweet Fragrance Retreat requires a \$75 deposit to complete registration.
- Participant shall make full payment to Sweet Fragrance Retreat 30 days prior to her retreat start date. If Sweet Fragrance Retreat does not receive its requested documents and full payment from Participant, 30 days prior to the retreat start date, Sweet Fragrance Retreat will release Participant's spot and refund Participant's registration fee or apply it to a subsequent retreat date within one calendar year of previously scheduled retreat.
- If Participant cancels within 15 days prior to the retreat, Sweet Fragrance Retreat will release Participant's spot at her selected retreat, or apply it to a subsequent retreat date within one calendar year of previously scheduled retreat. If Participant chooses not to apply the registration fee to a subsequent retreat date, Participant's \$75 registration fee will NOT be refunded and instead will be considered a donation to Sweet Fragrance Retreat.

Please contact Sweet Fragrance Retreat with any questions regarding our cancellation policy.
sweetfragrance@protonmail.com

Privacy Policy

Sweet Fragrance Retreat is committed to maintaining the privacy of our website visitors, retreat participants and donors. We do not share, sell, rent or trade information about donors and other contacts. Sweet Fragrance Retreat gathers specific information on our website so that we can keep in contact with you, share program information and education. Specifically, when you fill out a contact or email list form we may gather the following:

Your name

Your email address

Your contact information, phone number and address

If you are donating or paying a registration fee, credit card information, such as card number, type, and expiration date.

If you are registering for a retreat, there may be personal health information which is kept confidential.

The personal information you provide is solely utilized to process and receipt your donation, to register your attendance at an event or retreat, or to respond to any information requests. If you would like to stop receiving correspondence from us including newsletters, retreat updates and other communication, please respond to us at sweetfragrance@protonmail.com.

Comments or questions regarding our Privacy Policy should be directed to:
sweetfragrance@protonmail.com

I, the undersigned, do attest and agree to the Terms and Conditions aforementioned above as a participant of the Sweet Fragrance Retreat.

Signature

Date

Please return completed forms along with payment to:

*Sweet Fragrance Retreat
c/o Linda Elliston
5934 Old Hwy 2 Loop
Moyie Springs, ID 83845*

Registration is not complete until your deposit has been received.

Riverbend Retreat Liability Agreement

Riverbend Retreat is the name we feel reflects God's purpose for the riverfront property He has given us. In seeking to be good stewards of this place, we have drawn up this agreement to make clear what the expectations are for those who visit. Our desire is that all who come enjoy God's presence and are refreshed by the natural beauty here while remaining safe and careful at the same time. Please read this agreement thoroughly and sign and date it below.

Article 1, Liability

I/we agree to waive any and all liability against Stephen C. Plog, and Lisa P. Plog, their family members, New Siloam Ministries, employees, representatives, principals, lessors, lessees, vendors, contractors, subcontractors, etc. for any injury, death, loss, or damage caused to myself and/or my family members due to my/our residing at Riverbend Retreat located at 2787 Westside Road, Bonners Ferry, Idaho, 83805, hereafter referred to as "Riverbend Retreat".

I/we acknowledge that the buildings and facilities at Riverbend Retreat may not meet Idaho health and safety standards or codes, and I/we, therefore, assume and accept any health and safety risks I, or my family members or guests, may incur because of this including, but not limited to, death by drowning, animal mauling by bear, mountain lion, moose, or other wild animal or equine animal. I further acknowledge that this property does not have child safety features including, but not limited to, safety latches on doors and cupboards, safety gates at the top and bottom of interior and exterior stair cases, fencing around the property, fencing on the Kootenai River's edge, fencing around the pasture or the pasture drainage ditch or the pasture pond. This property also has hot electric fencing around the pasture.

Article 2, Indemnity

I/we agree to indemnify and defend Stephen C. Plog and Lisa P. Plog and New Siloam Ministries, and shall hold them harmless as well as their family members, agents, employees, representatives, principals, lessors, lessees, vendors, contractors, subcontractors, etc. against any and all demands, claims, suits, actions, causes of action, etc. for any injury, illness, death, loss or damage that arises out of or relates in any way to my/our stay at Riverbend Retreat.

Article 3, Claims

In the event that either party to this Agreement seeks to assert any claim against the other party for any reason in connection with this Agreement or the activities of the other party under it, the party asserting claim shall, within one hundred eighty (180) days of learning of the circumstances giving rise to the claim, reduce it to writing (stating the nature of the claim and amount of relief sought) and serve it on the other party. Any claim for liability under this Agreement not made in compliance with this Paragraph is waived.

Article 4, Arbitration of Disputes

All disputes, claims, and questions regarding the rights and obligations of the parties under the terms of this Agreement are subject to arbitration. Either party may serve on the other a written demand for arbitration within 180 days after the dispute

first arises. Any demand for arbitration of a claim served in compliance with Article 5 above shall be contained within and served with the written claim. The arbitration shall be conducted by three arbitrators (one appointed by Stephen C. Plog or Lisa P. Plog, one by me/us, and a third by the other two arbitrators) in accordance with the rules of commercial arbitration of the American Arbitration Association. Each party shall pay its own costs in connection with the arbitration, and costs of the arbitrators shall be paid in equal amounts by the parties.

Article 5, Severability

If, for any reason, any provision or provisions of this agreement are determined to be invalid and contrary to any existing or future law, such invalidity shall not impair the operation or affect those portions of this agreement that are valid.

Article 6, Captions

The captions of sections/articles and subsections contained in this agreement are for convenience only and shall not control or affect the meaning or construction of any of the provisions of this agreement.

Article 7, Safety

For safety reasons, all potential guests who are currently using (or recently have used, within the past three months) mood-altering medications or substances which can impair balance/judgment, either recreationally or under prescription, are subject to pre-approval before attending Riverbend Retreats.

Please check one statement below:

YES, I currently use or have recently (within the past three months) used mood-altering medications or substances which can impair my balance/judgment. (If checked, please contact Steve Plog before signing this agreement -- stephencplog@gmail.com)

NO, I am not currently using nor have recently (within the past three months) used mood altering medications or substances which can impair my balance/judgment.

We also ask that guests refrain from smoking/vaping while on the property.

Printed Name

Date

Age

Signature