



OA Serenity Retreat

April 29 – May 1, 2011

Sponsored by the Silicon Valley Intergroup of Overeaters Anonymous

Let's Get Real: Practicing the Steps, Traditions, and Principles in Our Daily Lives

RELAX: This retreat is held at the **Villa Maria del Mar** (www.villamariadelmar.org), a beautiful ocean-side retreat facility in Santa Cruz. Our retreat leader has 30 years of abstinence and has spoken at numerous Region and World Service events with wisdom, insight and humor. The program highlights the promise of **freedom** and creating a sense of **supportive community**.

COST: **Early registration postmarked on or before Jan 31, 2011:** \$250 Double or \$300 Single
Registration postmarked from Feb. 1, 2011 or later: \$275 Double or \$325 Single
Post-dated checks are not accepted and will be returned. This affects your postmark date.

REGISTER: To protect our anonymity, **only OA members may attend this retreat**. Your registration fee provides for two-night accommodations plus six meals from Friday night's dinner through Sunday afternoon's lunch. The selection of your room is based on your postmark date. We have a limited number of ocean view rooms and a limited number of singles. **Registration confirmations** are mailed at least **three weeks** prior to the retreat. **April 15, 2011** is the final deadline for registrations.

REFUNDS: No refunds will be issued **after February 28, 2011 unless** we can fill your spot from the waiting list. All refunds and cancellations are subject to a **\$25 cancellation fee** and do not include substitution of names. Fees are not transferable between retreats.

FUNDING: If you cannot afford the registration fee, you may apply for a **partial scholarship**. If funding is available, a scholarship for **one half** the cost of a **double-occupancy** room will be offered. **To qualify** for this scholarship, include a **written nomination from your OA sponsor** with your check for one half the double room rate. Applicants awarded scholarships will be notified approximately three weeks before the retreat. Their checks will be deposited at that time.

CONTACT: For registration questions, contact **Karen F.** 408-482-3009, kjfriedman@aol.com. For general questions, contact **Amy F.** (Chair) 650-906-3598, amyefriedman@gmail.com or **Barbara R.** (Treasurer) 415-255-8467, beeshp1@gmail.com

Make checks payable to: **OA Serenity Retreat**

Mail completed registration form to:

**OA Serenity Retreat, 1765 Landess Ave, Box #300,
MILPITAS, CA 95035-7019**

APRIL 29 - MAY 1, 2011 OA SERENITY RETREAT REGISTRATON FORM

April 16, 2011 is the final deadline for registrations.

Name	Email
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Address	City	Zip Code
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Home Phone #: ()	Work or Cell Phone #: ()
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Note: There are **only nine single** rooms, which will likely fill up by June 1, 2010. All rooms have a private bathroom, **except** for three singles. **Please mark ONE box.**

1. I request a **double room** and would like to share my room with _____
or please match me up with a roommate. (Specify your requested roommate's name)

2. I request a **single room**. If none are available, please return my check immediately (cancellation fee waived.)
 I request a **single room**. If none are available, please put me on the **Singles Waiting List**.
 I request a **single room**. If none are available, I will accept being matched-up with someone in a **doubles room**. Placed me on the **Singles Waiting List**.

3. My special needs are _____ (E.g. mobility, C-PAP)