

"BRIGHT CLOUD WOMAN AND LIVE ARROW"

Letting Go of Self-Importance of the Ego-Mind and Living in a State of Well-Being

☉ May 27 - May 30, 2010 ☉

MAIL OR FAX COMPLETED EVENT REGISTRATION FORM TO:
LYNN ANDREWS PRODUCTIONS - P.O. BOX 2876, EDGEWOOD, NM 87015
FAX: (480) 240-1581
OR YOU MAY USE YOUR CREDIT CARD TO REGISTER BY PHONE 1-800 554-7414

ENCLOSED IS MY FULL PAYMENT OF \$ 750.00 - REGISTER AND PAY BY APRIL 9, 2010 AND SAVE \$100.00!

ENCLOSED IS MY FULL PAYMENT OF \$ 850.00 - AFTER APRIL 9 , 2010

ENCLOSED IS MY NON-REFUNDABLE DEPOSIT OF \$200.00
BALANCE DUE: \$650.00 \$325.00 - PAYABLE BY MARCH 16, 2010
FINAL PAYMENT OF \$325.00 - PAYABLE BY APRIL 16, 2010

I AM PAYING BY CHECK OR MONEY ORDER
(PAYABLE TO LYNN ANDREWS PRODUCTIONS) ALL RETURNED CHECKS WILL INCUR \$25.00 FEE

I AM PAYING BY CREDIT CARD: VISA MASTER CARD AMEX DISCOVER

CARD# _____ EXPIRATION: _____

PLEASE NOTE THAT credit cards will be automatically processed by the above dates, all payments made by check and money order are due on or before above dates.

☉ **EVENT FEE DOES NOT INCLUDE MEALS OR LODGINGS AT GHOST RANCH** ☉

RATES RANGE FROM \$440.00* TO \$575.00* PER PERSON INCLUDING MEALS

*BASED ON YOUR CHOICE OF ACCOMMODATIONS - PLEASE SEE DETAILS ON PAGE 4

PLEASE COMPLETE ACCOMMODATION REGISTRATION FORM ON PAGE 2 & 3 SEPARATELY

NAME: _____ HOME PHONE: (____) _____

ADDRESS: _____ WORK PHONE: (____) _____

CITY: _____ CELL PHONE: (____) _____

STATE: _____ COUNTRY: _____ ZIP: _____ E-MAIL: _____

RELEASE - EVERYONE MUST READ AND SIGN: I understand there is a non-refundable deposit of \$200.00 at the time of registration, and further, that 40 days prior to the event the non-refundable deposit will increase to \$500.00, and that 14 days prior to the event the entire fee will become non-refundable. I also understand that Lynn Andrews Productions and The Ghost Ranch Conference Center, or any individuals or organizations associated with these groups, are not responsible for, and I release them from liability for, any accidents, injuries, illness, loss, theft or other mishaps that might occur, whether or not as a result of negligence, in connection with this gathering. I understand that some parts of the gathering may be photographed and videotaped and I agree to allow myself to be filmed and give up any rights that I might have regarding the video or photographs or use of these images or recordings from this Joshua Tree Gathering. I further understand if I offer or accept a ride from another participant I do so also on my own responsibility and release LYNN ANDREWS PRODUCTIONS from any liability. I am responsible for my own experience.

SIGNATURE: _____ DATE: _____

PRESENTING THE 22ND ANNUAL JOSHUA TREE GATHERING WITH LYNN ANDREWS

PLEASE COMPLETE, SIGN AND RETURN THE ACCOMMODATION AND GENERAL INFORMATION FORMS

NO LATER THAN APRIL 16, 2010

PLEASE PRINT CLEARLY AND FAX OR MAIL TO:

LYNN ANDREWS PRODUCTIONS
PO BOX 2876, EDGEWOOD, NM 87015, FAX # 480-240-1581

NAME: HOME PHONE: ()
ADDRESS: WORK PHONE: ()
CITY: CELL PHONE: ()
STATE: COUNTRY: ZIP: E-MAIL:

HOW DID YOU FIRST HEAR ABOUT JOSHUA TREE?

MAGAZINE AD PLEASE INDICATE WHICH ONE: WHOLE LIFE TIMES CONSCIOUS LIVING WISDOM
PURE INSPIRATION MYSTIC POP INSPIRATION JOURNAL HAWAII

HOW MANY TIMES HAVE YOU BEEN TO A JOSHUA TREE GATHERING? THIS YEAR (2010) + PAST YEARS =

LYNN ANDREWS EVENTS ATTENDED: PLEASE CHECK ALL THAT APPLY.

JOSHUA TREE: (CIRCLE YEARS ATTENDED) 89 90 91 92 93 94 95 96 97 98 99 00 01 02 03 04 05 06 07 08 09
HAWAII INTO THE CRYSTAL DREAM-TIME PRIVATE CONSULTING WHOLE LIFE EXPO ON-LINE COURSES
MASK MAKING WORKSHOP FEMININE RITES OF PASSAGE COUNCIL- WHICH ONE?

EMERGENCY INFORMATION: (Relative or friend in case of emergency) RELATIONSHIP

NAME: HOME PHONE: ()
ADDRESS: WORK PHONE: ()
CITY: CELL PHONE: ()
STATE: COUNTRY: ZIP: E-MAIL:

I AM TAKING THE FOLLOWING MEDICATIONS FOR:

TO BEST FACILITATE AND SUPPORT YOUR TRAINING AND GROWTH, WE REQUEST THE FOLLOWING INFORMATION:

ARE YOU CURRENTLY IN THERAPY, EITHER CONVENTIONAL OR ALTERNATIVE COUNSELING? YES NO
IF YES, HAS YOUR THERAPIST BEEN ADVISED OF YOUR PARTICIPATION IN THIS GATHERING? YES NO DOES NOT APPLY

IT IS IMPORTANT THAT YOUR THERAPIST/COUNSELOR BE INFORMED OF YOUR PARTICIPATION IN THE EVENT, SO THAT THEY ARE AWARE OF THE PROCESS YOU ARE UNDERTAKING AND THE INPUT BEING PROVIDED BY YOUR WORK WITH THIS GATHERING. IT IS NOT OUR INTENTION TO INTERFERE WITH THE WORK YOU AND YOUR THERAPIST ARE DOING. IF YOU HAVE ANY QUESTIONS ABOUT THIS, PLEASE CALL SUZANNE EDISON AT 800-554-7414.

HAVE YOU EVER BEEN TREATED FOR AN EMOTIONAL OR PSYCHOLOGICAL CONDITION FOR WHICH HOSPITALIZATION WAS REQUIRED OR SUGGESTED? YES NO

GENERAL HOUSING & MEAL INFORMATION:

I DO NOT SMOKE I SMOKE (No smoking allowed in rooms) FEMALE MALE
I HAVE A MEDICAL NEED FOR A SPECIAL ROOM (Please explain)

ROOMMATE(S):

PLEASE SELECT ONE MEAL CHOICE ONLY: VEGETARIAN MEAT

PRESENTING THE 22ND ANNUAL JOSHUA TREE GATHERING WITH LYNN ANDREWS

1. I AM STAYING AT THE ABIQUIU INN AND PAYING \$30.00/DAY FOR MEALS AT G.R. () DAYS @\$30.00= \$ _____

ROOM OPTIONS ON SITE: MEALS INCLUDED (FOR ROOM DETAILS PLEASE SEE NEXT PAGE)

FROM WEDNESDAY NIGHT TO SATURDAY NIGHT INCLUSIVE:

- 2. I AM PAYING \$575.00 FOR A PRIVATE ROOM ON THE UPPER MESA
- 3. I AM PAYING \$545.00 FOR A PRIVATE ROOM ON THE LOWER LEVEL
- 4. I AM PAYING \$500.00 FOR A SEMI-PRIVATE ROOM
- 5. I AM PAYING \$465.00 FOR A LOWER LEVEL SHARED ACCOMMODATION
- 6. I AM PAYING \$440.00 FOR AN UPPER MESA SHARED ACCOMMODATION

CAMPING OPTIONS: PRICES ARE PER SITE, NOT PER PERSON

(MEALS PRICED SEPARATELY, PER PERSON- PLEASE SEE OPTION #10)

- 7. I AM PAYING \$19.00/DAY FOR BASIC TENT CAMPING () DAYS @\$19.00= \$ _____
- 8. I AM PAYING \$22.00/DAY FOR TENT CAMPING WITH ELECTRICITY () DAYS @\$22.00= \$ _____
- 9. I AM PAYING \$29.00/DAY FOR RV WITH FULL HOOKUP () DAYS @\$29.00= \$ _____
- 10. I AM PAYING \$30.00/DAY FOR MEALS () DAYS @\$30.00= \$ _____

*****ONLY ONE PERSON PAYS THE CAMPING RATE. ADDITIONAL CAMPING-MATE(S) SELECT MEAL OPTION ONLY*****

CAMPING-MATE(S) _____

ARRIVAL INFORMATION: (TO RESERVE YOUR SHUTTLE SERVICE WITH TWIN HEARTS PLEASE REFER TO NEXT PAGE)

I WILL BE ARRIVING BY TWIN HEARTS SHUTTLE SERVICE I WILL BE DRIVING TO GHOST RANCH

GHOST RANCH ARRIVAL DATE & TIME _____

GHOST RANCH DEPARTURE DATE & TIME _____

NURSING & THERAPIST CE'S:

PLEASE COMPLETE THIS INFORMATION IF YOU ARE A NURSE OR THERAPIST SIGNING UP FOR CE'S.

STATE WHERE YOU ARE LICENSED: _____

LICENSE# _____ EXPIRATION: _____ TITLE: _____

11. I AM PAYING \$60.00 NURSING & THERAPIST FEE

PAYMENT INFORMATION: (PLEASE ADD ALL APPLICABLE OPTIONS 1-11)

ENCLOSED IS MY FULL PAYMENT OF \$ _____ **DUE NO LATER THAN APRIL 16, 2010**

I AM PAYING BY CHECK OR MONEY ORDER (PAYABLE TO LYNN ANDREWS PRODUCTIONS)

I AM PAYING BY CREDIT CARD: VISA MASTER CARD AMEX DISCOVER

CARD# _____ EXPIRATION: _____

PLEASE NOTE: I understand that credit cards will be automatically processed by above date. All payments by cheque or money order are due on or before above date. All returned cheques will incur a \$25.00 fee.

SIGNATURE: _____ DATE: _____

ABOUT THE ACCOMMODATIONS

THERE ARE FIVE CHOICES OF ROOM TYPES AND THREE CAMPING OPTIONS. **THREE MEALS PER DAY ARE INCLUDED WITH ROOM OPTIONS** AND ARE AVAILABLE AT AN **ADDITIONAL \$30.00/DAY/PERSON WITH THE CAMPING OPTIONS**. THE NUMBER OF EACH TYPE OF ROOMS IS VERY LIMITED, AND THEY WILL BE ASSIGNED ON A FIRST-COME-FIRST-SERVED TYPE BASIS, WITH A FEW EXCEPTIONS MADE FOR KNOWN MEDICAL CONDITIONS.

ROOM OPTIONS:

1. PRIVATE - UPPER MESA & LOWER LEVEL: PLEASE NOTE 'PRIVATE' REFERS TO THE BATHROOM. YOU WILL HAVE A ROOMMATE. THESE ROOMS ARE ON THE UPPER MESA (\$575.00) AND LOWER LEVEL (\$545.00) AND HAVE A PRIVATE BATHROOM.

2. SEMI-PRIVATE: THESE ROOMS ARE ALSO ON THE LOWER LEVEL. THERE ARE TWO BEDS PER ROOM WITH A BATHROOM CONNECTING YOU TO ANOTHER SEMI-PRIVATE ROOM (FOUR PEOPLE SHARE A BATHROOM).

3. LOWER LEVEL SHARED: AGAIN THERE ARE TWO BEDS PER ROOM, WITH FOUR TO EIGHT ROOMS SHARING A COMMON BATHROOM WITH MULTIPLE SHOWERS AND TOILETS, SIMILAR TO AN EXERCISE GYM TYPE SET-UP. YOU STEP OUT OF YOUR FRONT DOOR AND DOWN A COVERED PORCH TO THE BATHROOMS. THESE ROOMS ARE ON THE LOWER LEVEL AND DO NOT REQUIRE AS MUCH WALKING AS THE MESA ROOMS.

4. UPPER MESA SHARED: THE MESA ROOMS ARE RUSTIC AND HAVE INCREDIBLE PANORAMIC VIEWS. THEY REQUIRE WALKING UP A STEEP PATH TO THE HIGHER MESA AREA. AGAIN THERE ARE TWO BEDS PER ROOM, WITH FOUR TO EIGHT ROOMS SHARING A COMMON BATHROOM WITH MULTIPLE SHOWERS AND TOILETS, SIMILAR TO AN EXERCISE GYM TYPE SET-UP. YOU STEP OUT OF YOUR FRONT DOOR AND DOWN A COVERED PORCH TO THE BATHROOMS.

CAMPING OPTIONS:

CAMPGROUND : **PRICES DO NOT INCLUDE MEALS.** THE CAMPGROUND BATHHOUSE IS EQUIPPED WITH AN ICE MACHINE, SHOWERS, TOILETS, SINKS AND COIN-OPERATED LAUNDRY FACILITIES. THERE IS A 10-15 MINUTE WALK TO DINING HALL AND MEETING ROOMS. CAMPSITES ARE PROVIDED WITH PICNIC TABLES AND FIRE-RING. CAMPFIRE ARE AVAILABLE ONLY WHEN WEATHER CONDITIONS PERMIT. THE HIGH DESERT ENVIRONMENT IS SUBJECT TO PERIOD OF DROUGHTS WITH HIGH FIRE DANGER.

TO RESERVE YOUR ROOM OR CAMPSITE:

VERY IMPORTANT: BECAUSE OF OUR CONTRACTUAL OBLIGATION WITH GHOST RANCH, ALL UNRESERVED ROOMS MUST BE RELEASED WELL BEFORE THE EVENT, **THEREFORE WE NEED YOU TO RESERVE AND PAY FOR YOUR ROOM NO LATER THAN APRIL 16, 2010.** IF YOU DO NOT, YOU WILL RISK THE VERY REAL POSSIBILITY OF NOT HAVING A ROOM AT THE EVENT. THE NEAREST MOTEL, WITH VERY LIMITED ROOM AVAILABILITY, IS THE **ABIQUIU INN IN ABIQUIU**, WHICH IS TWENTY MINUTES DRIVE FROM GHOST RANCH AND REQUIRES ADVANCE RESERVATIONS AS WELL. CALL TOLL FREE AT **888-735-2902** OR VISIT THEIR WEBSITE AT www.abiquiunn.com FOR FURTHER INFORMATION. PLEASE LET THEM KNOW YOU ARE WITH THE LYNN ANDREWS EVENT AT GHOST RANCH TO RECEIVE A SPECIAL ROOM RATE (10% DISCOUNT).

TO RESERVE YOUR SHUTTLE SERVICE:

IF YOU PLAN ON TAKING THE SHUTTLE FROM ALBUQUERQUE OR SANTA FE, YOU WILL BE MAKING YOUR OWN RESERVATIONS AND ARRANGEMENTS WITH 'TWIN HEARTS SHUTTLE SERVICE' BY CALLING **800-654-9456 (US ONLY) OR 505-751-1201.** BE SURE TO TELL THEM YOU ARE WITH THE LYNN ANDREWS EVENT AT GHOST RANCH TO RECEIVE THE SPECIAL RATE OF **\$60.00 - \$75.00 ONE WAY OR \$95.00 ROUND TRIP.** PLEASE ENSURE YOUR FLIGHT ARRIVAL LEAVES ENOUGH TIME TO MEET THE SHUTTLE. TWIN HEARTS WILL PROVIDE YOU WITH THE AVAILABLE PICK UP TIMES AND ANY ADDITIONAL INFORMATION YOU MAY NEED WHEN YOU CALL. **PLEASE RESERVE EARLY!**

PLEASE COMPLETE, SIGN AND RETURN THE ACCOMMODATION AND GENERAL INFORMATION FORMS

*****NO LATER THAN APRIL 16, 2010*****

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