

SIGN UP FOR

The Retreat

The undersigned (“Residential Responsible Party”) and Trulee Evanston hereby agree to the following:

1. Trulee Evanston acknowledges receipt of your deposit in the amount of \$1,000.
2. These funds will be credited towards monthly service fees, as applicable, once a monthly agreement has been signed.
3. Once notified of approval and availability, you will have 14 days to enter into monthly agreement.
4. This deposit will be fully refundable upon written request any time prior to the entering into monthly agreement. Written notice to Trulee Evanston is required and you will be refunded the full amount within thirty (30) days of such written notice of cancellation.

RESIDENT NAME _____ DOB / /

STREET ADDRESS _____

CITY/STATE/ZIP _____

PRIMARY CONTACT NAME _____ RELATIONSHIP _____

PRIMARY CONTACT PHONE _____ E-MAIL _____

SIGNATURE OF RESIDENT/RESPONSIBLE PARTY _____ DATE / /

SIGNATURE OF TRULEE EVANSTON REPRESENTATIVE _____ DATE / /

CHECK WHICH DAYS THE PARTICIPANT WILL ATTEND:

- Monday Tuesday Wednesday
 Thursday Friday

CHECK THE DESIRED TIME:

- Half-Day Morning (9 AM – 1 PM)
 Half-Day Afternoon (1 PM – 5 PM)
 Full-Day (9 AM – 5 PM)