

# Fall into Quilting Retreat 2025

Sponsored by Pam See  
Fall 2025

Thursday, October 9 thru Sunday October 12, 2025

Manderly Camp & Conference Center  
127S to 30E to Lower East Valley RoadS to Pratt RoadE, Pikeville, TN 37367

Arrive by 10am Thursday and depart by 2pm on Sunday

Lunch and Dinner Thursday  
Brunch and Dinner Friday and Saturday  
Brunch Sunday  
Have your own bed to sleep in.  
Each quilter gets their own 6' table.  
Quilt shop in sewing room, shop all weekend.  
Optional Project Class and free quilt pattern.  
Great Door Prizes.  
Quilting Instructor available all weekend.  
Three quilters to each cabin room  
Short walk to sewing room

Price \$265. After October 13, 2024 \$285.

\$140 deposit at registration\* will hold your spot  
Limit of 40 attendees  
Balance due by September 1, 2025  
Please make checks payable to Pam See

Registration and payment can be mailed to:  
Pam See, 156 Cedar Circle, Crossville, TN 38555

\*Deposit is non-refundable. If you need to cancel, we will make every effort to fill your spot so you can be refunded, but we cannot guarantee it.  
Check only.

Questions? Please contact  
Pam See 262-442-2643

Download Registration Form at [VanillaLatteQuilts.com](http://VanillaLatteQuilts.com), retreats page



Please join our Facebook page: Vanilla Latte Quilt Retreats



Mini 14"x 14" paper pieced quilt.

# Fall into Quilting Retreat 2025, October 9-12

(one form per attendee)

Name: \_\_\_\_\_ On Name Tag: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

A \$140 deposit is due at registration to hold your spot. Deposit is non-refundable unless your spot can be filled. Final payment is due by September 1, 2025, payment is nonrefundable unless your spot can be filled. Please make checks payable to Pam See, may mail payment to: Pam See, 156 Cedar Circle, Crossville, TN 38555

Attendees of this retreat shall hold harmless Pam See, and Manderly Christian Camp and Conference Center from and against all claims, losses, costs and damages including but not limited to any personal injury, sickness, disease, death or personal property damage. I understand that pictures may be taken at the retreat and give permission for my likeness to be used to promote future retreats. Your signature below confirms your agreement to comply with this statement.

Please list roommates on all registration forms. All roommate registration forms must match to prevent administration roommate assignments.

Roommates: \_\_\_\_\_  
(please print)

Check all boxes that apply (you must fill out and sign online activity waiver for the camp as listed below):

One or more of roommates requires handicap accessible room  
(We will make every effort to accommodate you so that your room is close to the sewing lodge.)

I have a food allergy (We will make every effort to accommodate your allergy, but cannot guarantee all food will adhere to your food requirements. Please make appropriate arrangements.) List allergy(s) below:

\_\_\_\_\_

I have signed **ONLINE** activity waiver. <https://form.jotform.com/221436398205153>

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_