

# Overnight Guest Registration

Date: **[Insert Date]**

To: **[Retreat Coordinator's Name]**

From: **[Your Name]**

**[Your Address]**

**[City, State, ZIP]**

**[Your Email]**

**[Your Phone Number]**

## Guest Information

Full Name: **[Guest's Full Name]**

Arrival Date: **[Check-in Date]**

Departure Date: **[Check-out Date]**

Room Preference: **[Single/Double/Shared]**

## Special Requests or Needs

[Insert any specific requests or needs, such as dietary restrictions or accessibility requirements]

## Emergency Contact Information

Contact Name: **[Contact's Name]**

Contact Number: **[Contact's Phone Number]**

Thank you for your attention to this registration. I look forward to a peaceful and rejuvenating experience at the retreat.

Sincerely,  
**[Your Name]**