

ROOMMATE MATCH REQUEST FORM

Please use this form if you want us to assist with introducing you to a potential roommate.

Phase 2 Player's Retreat in Santa Cruz, CA March 12-15, 2009

YES, please help me find a roommate!

First Name _____ Last Name _____

Address _____ City _____ State _____ Country _____ Zip _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Email _____ Date of birth: _____

Sex: Male Female Smoking Nonsmoking

Below, please list any special requests or concerns in regard to a roommate match and describe yourself to help us match you. i.e. "I'm easy to get along with"... "I need my private space"... "I am an early riser"... "I'm a night owl"... "I snore"... "I'm a light sleeper"... AND please list something about a "future" possible roommate that is NOT acceptable!

Signature: _____ **Date:** _____

Please fax this form to: (703) 637-1316

Ultimate Lifestyle Academy, 690 Berkmar Circle, Charlottesville, VA 22901