	GROUP RESERVATION FORM, BOOKING #21292	
A Madden's on Gull Lake		CHOICE COLLISION CENTERS Arrival: Friday, September 28, 2018
Check in: 4:30 pm	Departure: Sunday, September 30, 2018	
INSTRUCTIONS		PACKAGE DESCRIPTION & RATES
Fill out form, then print. Mail form with a check to Madden's on Gull Lake or Fax Form with Credit Card information to secure fax number below.		2-NIGHT LODGING PACKAGE: Run of House Room - 1 King
Madden's on Gull Lake Reservations Department 11266 Pine Beach Peninsula		\$309.16 for 2 nights lodging
Brainerd, MN 56401 Secure Fax: (218) 293-4517 Registration deadline is July 30, 2018		Run of House Room - 2 Queen \$309.16 for 2 nights lodging
ATTENDEE INFORMATION    Name:    Company Name:    Address:    Address:    City:State:Zip:    Day Phone:    Email:		Two-night lodging rates include use of beaches, swimming pools, sauna, whirlpool, fitness center, business center, service charge and applicable sales tax.
SHARE WITH:    Registering now Separately    Attendee Name:     Company :     OR		All rates are <b>per room</b> ; We will strive to honor your 1st choice, however, rooms will be assigned based on the number of guests registered in the room. For your safety and security, Madden's does not assign roommates. If additional names are not indicated, you may be assigned a room with one bed. Any reservation requests received after July 30, 2018 will be accepted on a space available basis only.
You are responsible for your entire stay; early departures or reservations reduced in length are not refundable. Package payments are refundable, less a \$25.00 cancellation fee if you cancel by July 30, 2018. Any cancellations made after July 30, 2018 will not receive a refund (replacements are gladly accepted). Reservations made after the deadline are non- refundable.		PAYMENT INFORMATION
		Full package payment is required at the time of reservation request. Mail form with check to Madden's on Gull Lake Fax form with credit card information
ADDITIONAL INFORMATION		Credit Card will be charged for deposit upon receipt of
Please note any special requests for lodging: (i.e. lodging accessibility, dietary restrictions or allergies) 		form. For your protection, do not mail credit card info.   Visa MasterCard Discover AmEx    Card #
		Exp Date: Code: Signature: