



GROUP RESERVATION FORM, BOOKING #20082

FBL FINANCIAL GROUP

Arrival: Monday, May 22, 2017

Departure: Tuesday, May 23, 2017

INSTRUCTIONS

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.

Madden's on Gull Lake
Reservations Department
11266 Pine Beach Peninsula
Brainerd, MN 56401
Secure Fax: 218-293-4517

Registration deadline: April 25, 2017

ATTENDEE INFORMATION

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Day Phone: _____
Email: _____

SHARE WITH:

Registering now ___ Separately ___
Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Day Phone: _____
Email: _____

ADDITIONAL INFORMATION

Please note any special requests for lodging or meals; (i.e., handicap accessibility, Addtl names or food allergies)

LODGING RATES

___ \$173.58 Run of House/Standard Room

***Rate listed are per room, per night, inclusive of applicable sales tax.**

Lodging package includes use of beaches, swimming pools, saunas, whirlpools, fitness center and business center.

Pre/Post Stays: Your Group's contracted rate will be honored 3 days pre- as well as 3 days post -conference, subject to availability. Please call Madden's reservation department at 800-642-5363 to make an extended reservation.

CANCELLATION POLICY

You are responsible for your entire stay; early departures or reservations reduced in length are not refundable. Package payments are refundable, less a \$25 cancellation fee if you cancel by April 25, 2017. Any cancellations made after April 25, 2017 will not receive a refund (replacements are gladly accepted.) Reservations made after the deadline are non-refundable.

PAYMENT INFORMATION

The full package payment is required at time of reservation request.

___ Mail form with check to Madden's on Gull Lake
___ Fax form with credit card information

Credit card will be charged the full deposit upon receipt of form. For your protection, do not mail credit card information.

___ Visa ___ MasterCard ___ Discover ___ AmEx
Card # _____
Exp Date: _____ Code: _____
Signature: _____