



Check in: 4:30 pm

GROUP RESERVATION FORM, BOOKING #19905

MN MAYORS ASSOCIATION MEETING

Arrival: Friday, April 28, 2017

Departure: Sunday, April 30, 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 is March 23, 2017

ATTENDEE INFORMATION

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

SPOUSE/GUESTS:

Adults:
Children's names & ages:

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 March 23, 2017. Any cancellations made after March 23, 2017 will not receive a refund. Reservations made after the deadline are non-refundable.

ADDITIONAL INFORMATION

Please note any special requests for lodging or meals: (i.e., wheelchair accessible, ground floor, food allergies)

LODGING ONLY RATES

Day Arriving Day Departing

Voyageur Hotel Rooms

\$150.78 per room, One Night
\$301.56 per room, Two Nights

Sunset Villas and Golf Villas

\$188.77 per room, One Night
\$377.54 per room, Two Nights

Lodging rates include lodging, use of pools, beaches, swimming pools, sauna, whirlpool, fitness center, business center, service charge and applicable sales tax.

All rates are per room; We will strive to honor your 1st choice, however, rooms will be assigned on a first-come, first-served basis and on the number of guests registered in a room. For your safety and security, Madden's does not assign roommates. Any reservation requests received after March 23, 2017 will be accepted on a space available basis only.

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: