## A Madden's on Gull Lake

Check in: 4:30 pm

## **GROUP RESERVATION FORM, BOOKING #16009**

## MINNESOTA HOSPITAL ASSOCIATION

Arrival: Tuesday, September 19, 2017 Departure: Friday, September 22, 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 Fay: (218) 293-4517

| Brainerd, Wilv 50401                                    |
|---|
| Secure Fax: (218) 293-4517                              |
| Registration deadline is August 22, 2017                |
| ATTENDEE INFORMATION                                    |
| Name:   |
| Company Name:   |
| Address:  |
| City:State:Zip:   |
| Day Phone:  |
| Email:  |
| SHARE WITH ANOTHER ATTENDEE:                            |
| Registering now Separately                              |
| Name:   |
| Company Name:   |
| Address:  |
| City:State:Zip:   |
| Day Phone:  |
| Email:SHARING ROOM WITH NON-CONFERENCE GUEST            |
| Spouse/Guest name(s):                                   |
|   |
|   |
|   |
| CANCELLATION POLICY                                     |
| CANCELLATION FOLICT                                     |
| 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 August 22, 2017. |
| Any cancellations made after August 22, 2017 will not   |
| receive a refund (replacements are gladly accepted).    |
| Reservations made after the deadline are non-           |
| refundable.   |
| ADDITIONAL INFORMATION                                  |
|   |
| Please note any special requests for lodging or         |
| meals: (i.e., lodging accessibility or food allergies)  |
|   |
|   |

| PACKAGE DESCRIPTION & RATES   |
|---|
| 3-NIGHT SEVEN MEAL PACKAGE:   |
| Wednesday breakfast thru Friday breakfast   |
| \$896.43 Single Occupancy, per person   |
| \$563.08 Multiple Occupancy, per person   |
| 2   |
| 2-NIGHT FIVE MEAL PACKAGE:  |
| Wednesday dinner thru Friday breakfast  |
| \$634.68 Single Occupancy, per person   |
| \$417.40 Multiple Occupancy, per person   |
| Package includes lodging, meals as indicated, Tennis & Croquet Club, non-motorized watercraft, green fees for MHA's golf event, service charge and applicable sales tax.  |
| All rates are <b>per person</b> ; the multiple occupancy rate requires 2 or more conference attendees sharing a room. We will strive to honor your 1st choice, however, rooms will be assigned based on the number of guests staying in a room. For your safety and security, Madden's does not assign roommates. If additional occupant(s) are not indicated, we will assign a single room with a <i>single occupancy rate</i> . Any reservation requests received after August 22, 2017 will be accepted on a space available basis only. |
| ALTERNATE PACKAGE OPTION  |
| \$727.28 <b>Three Nights</b>  |
| \$493.91 <b>Two Nights</b>  |
| \$260.54 <b>One Night</b>   |
| Includes lodging and Thursday lunch at the Town Hall<br>Governor's Ballroom. Call 800-642-5363 to check<br>availability.  |
| 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 # Code:  |

Lodging at Madden's will be confirmed once your conference registration with MN Hospital Association is confirmed.

We reserve the right to make overflow reservations at a neighboring property, if necessary.

Signature: