

GROUP RESERVATION FORM BOOKING #20737

BREMER PRODUCER CONFERENCE

Arrival: Tuesday, October 3, 2017 Departure: Wednesday, October 4, 2017

Check in: 4:30 pm

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

Brainerd, MIN 56401
Secure fax: 218-293-4517
Registration deadline is September 7, 2017
GUEST INFORMATION
Name:
Company Name:
Address:
City:Zip:
Day Phone:
Email:
ADDITIONAL OCCUPANTS
Adults:
Children's names & ages:
CANCELLATION POLICY
You are responsible for your entire stay; early departures or rservations reduced in length are not refundable. Deposits are refundable, less a \$25 cancellation fee if you cancel by September 7, 2017. Any cancellations made after September 7, 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., lodging accessibility or food allergies) ———————————————————————————————————

ONE-NIGHT ROOM RATE
\$150.78 per room, Run of House rooms
EXTENDED STAY
\$150.78 per room, per night
Day Arriving Day Departing

PACKAGE DESCRIPTION & RATES

All rates are **per room**; For your safety and security, Madden's does not assign roommates. If additional occupants are not indicated, you may be assigned a room with one bed. Any reservation requests received after September 7, 2017 will be accepted on a space available basis only.

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

PAYMENT INFORMATION

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 full deposit upon receipt of form. For your protection, do not mail credit card information.

___ Visa ___ MasterCard ___ Discover ___ AmEx

Card # _____

Exp Date: ____ Code: ____
Signature: _____