

INSTRUCTIONS

- **COMPLETE ONE FORM PER PERSON.**
- Registration cut off date is **August 21, 2009.**
- Send completed form and **50 percent of lodging package for deposit** per person, or fax with credit card information to:
 Reservation Department
 Grand View Lodge
 23611 Woodward Avenue
 Nisswa, MN 56468
 FAX: 218-963-9886

PERSONAL INFORMATION

Name: _____
 Company Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Day Phone: _____
 Email: _____
All confirmations will be sent via email (please be legible)

PACKAGE DESCRIPTIONS & RATES

LODGING PACKAGE:

- Single Occupancy \$564.98, per person
- Double Occupancy \$431.30, per person
- Spouse/Guest Rate \$287.54, per person

Package includes **2 nights lodging**, meetings, three meals daily beginning with dinner on Sunday night and concluding with Lunch on Tuesday.

*Additional Nights, Rate: \$137.50 per person, per night, Room Only (meals not included).

Note: *Rooms may be in a multiple bedroom unit. All rates are inclusive of an 18% Service Charge and a 6.875% State Sales Tax.

Additional Nights Requested _____
(Same rates apply and are based on availability).

of Attendees: _____ **# of Guests:** _____

Name(s) and children's ages: _____

For your safety and security, Grand View will not assign roommates. If the 2nd Occupant is not indicated (or no form is received by deadline date), we will assign a single room.

Note: GVL single occupancy consists of one person in a bedroom with a private bathroom. Double occupancy consists of two people sharing a bedroom and a bathroom. These rooms may be in a multiple bedroom unit.

ADDITIONAL INFORMATION

UNIT SHARING REQUEST: -

Unit Sharing Request. Indicate desired roommate(s) and **send forms in together.** Each roommate must complete a separate form.

Name(s): _____

***Please note any special needs requests for lodging or meals: (i.e.: handicap accessibility or food allergies)**

PAYMENT INFORMATION

Purchase Order No. _____ (if applicable)

- Check payable to Grand View Lodge.
- Credit Card (Card will be charged deposit upon receipt of form.)
 Visa MasterCard Discover AmerEx

Card #: _____

Expiration Date: _____

Signature: _____

Please charge full amount of package upon receipt of form or full payment is enclosed

CANCELLATION INFORMATION

No refunds on reservations cancelled less than 15 days prior to arrival.

Deposits on reservations cancelled 15 days or more prior to arrival will be refunded, less the first nights revenue per person processing fee.

Upon receipt of your reservation you will be held responsible for the dates reserved. You are responsible for your entire stay. Early departures or reservation reductions are not refundable.

Deposits on cancellations when sharing with a roommate will not be refunded. Roommate replacements will be accepted OR single occupancy will be charged. Grand View will not assign roommates.