



DISTRICT 4-C4 CONVENTION REGISTRATION FORM

May 18-21, 2017

Red Lion Hotel Redding

1830 Hilltop Dr, Redding CA 96002



PLEASE PRINT:

[A] _____ [B] _____
Lion's First Name/Last Name Spouse/Partner/Guest First Name/Last Name
[A] _____ [B] _____
Lions Club Name Lions Club Name

Address, City, State, Zip Code Phone Email
[A] [B] [A] [B] [A] [B]
[] [] DELEGATE [] [] LION [] [] GUEST OR NON-LION [] [] MEALS ONLY
[] [] ALTERNATE [] [] CABINET OFFICER [] [] FIRST TIME [] [] ATTENDING PARTNER-IN-SERVICE
[] [] CLUB PRESIDENT [] [] DISTRICT COMMITTEE CHAIR [] [] VEGETARIAN MEALS
[] [] CLUB SECRETARY [] [] PAST DISTRICT GOVERNOR [] [] GLUTEN FREE MEALS

RESERVATIONS: The total amount due for attending the convention MUST accompany this registration form & be received by 04/10/17.

CANCELLATIONS: In order to receive a refund, Housing Chair MUST be notified 20 days prior to start of convention.

Table with 3 columns: Package Description, Price (Double and Single Occupancy), and Total Price. Packages include Wednesday, Thursday, Friday, and Saturday arrivals.

A LA CARTE ROOM RATES - please indicate number of rooms:
___ Wednesday \$120.00 ___ Thursday \$120.00 ___ Friday \$120.00 ___ Saturday \$120.00 ROOMS TOTAL \$ _____

A LA CARTE MEALS - All meals must be ordered in advance. Please indicate the number of meals requested.
___ Thursday Dinner @ FREE ___ Friday Lunch @ \$29.00 ___ Friday Dinner @ \$42.00 Entrée Choice ___ Pork Loin ___ Salmon
___ Saturday Breakfast @ FREE ___ Saturday Dinner @ \$45.00
TOTAL A LA CARTE MEALS \$ _____

TOTAL Enclosed \$ _____

ACCOMODATIONS REQUESTED - while we cannot guarantee your request we will do our best to accommodate your request
___ Ground floor room ___ Handicap Room ___ Single bed in room ___ Two beds in room
___ Special requirements _____

CHECK IN TIME IS 3:00 PM. We cannot guarantee your room will be available prior to check in time.

DEADLINE TO RESERVE HOTEL AT RATES LISTED ABOVE IS APRIL 10, 2017

Make check payable to DISTRICT 4-C4 CONVENTION and mail with this registration form to:
PDG Jack Van Etten, District 4-C4 Convention Housing Chair, P.O. Box 25301, San Mateo CA 94402
For additional information, please call 650-740-9404 or email jackusf74@comcast.net
Please keep a copy of this registration form for your records.