

Decatur Conference Center & Hotel Registration Form



Illinois Moose Association *February 14-18, 2018*

Guest Name: _____

Arrival Date: _____

Address: _____

Departure Date: _____

City/ State/Zip Code: _____

Phone #: _____

**** All Reservations require 2 night minimum stay**

	Room Type Standard Room Type	Group Rate \$85.00 plus 14% tax	# Adults	# Children
	One King			
	Two Queen Beds			
	Room Type Business Class	Group Rate: \$95.00 plus 14% tax	# Adults	# Children
	One King			
	Two Queen Beds			

***cannot guarantee specific room types or room numbers, rooms are based on availability at the time of booking, if first room type requested is not available the next available room type will be reserved. We are now a smoke free facility.*

Name of Person sharing Room _____

Special Requests:

<input type="checkbox"/> Wheel Chair Access	<input type="checkbox"/> Other
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****All rooms must have individual names and forms of payment assigned to each room**

1ST night's room and tax is required upon booking reservation. Credit card, check or money ordered accepted.

Payment Information: All payments become non refundable after Jan 1, 2018

a) 1st night's deposit check enclosed: _____

b) Credit Card information: _____ Exp. Date: _____

Name on card: _____

Authorized signature: _____

****Reservations taken by mail, email, or fax only (Must be postmarked by Jan 1st, 2018)**

Fax # (217) 422-9690 email tperryman@hoteldecatur.com

Mail this form to: **Decatur Conference Center & Hotel**
Attn; Tina Perryman
4191 US Highway 36 West - Decatur, IL 62522

No phone reservations accepted

Reservations made after Jan 15th, 2018 will be subject to current non group rate and availability.

We are looking forward to hosting your 2018 convention!

***We will accept checks with the reservation form. **Checks will not be taken at the time of conference.** We no longer take pre-paid debit cards. Cash, Credit or regular Debit are fine.*