



**Region 12 Convention  
APRIL 22-25, 2010**

**SUITE RESERVATION FORM**

**INDIVIDUAL / CHAPTER** \_\_\_\_\_ **NAME OF CONTACT** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **DEADLINE DATE** \_\_\_\_\_ (March 1 – Individuals)

**PHONE** (Day) (\_\_\_\_) \_\_\_\_\_ **PHONE** (Eve) (\_\_\_\_) \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**SUITES RESERVED BY MEMBERS or CHORUSES**

**IS THIS A CHORUS HOSPITALITY SUITE?** YES  NO   
**IS THIS A QUARTET SUITE?** YES  NO

**INSTRUCTIONS:** Use this form to reserve the suite of your choice. Take the opportunity to study the GRAND SIERRA RESORT Guest Suite Tri-fold to pick the one that will best meet the needs of you or your chorus. Choruses and quartets will have the first choices for the suites. Please list two choices. Your first choice would be the suite. If there are not enough of those suites available then you will be assigned your second choice which may be a different suite, a regular room (floors 1-16) or an upgraded room (floors 17-23). Please fill in the names of each person to be staying in the suite. One roll-a-way may be added to a one bedroom suite.

**Arrival Date:** Thurs. April 22  Fri. April 23  Sat. April 24  (3 PM check in)

**Departure Date:** Fri. April 23  Sat. April 24  Sun. April 25  (11:00 AM check out)

**SUITES: 1<sup>ST</sup> Choice** \_\_\_\_\_ **2<sup>nd</sup> Choice** \_\_\_\_\_

**Reservation for a COMPETING QUARTET?** No  Yes  **Quartet Name** \_\_\_\_\_

Names of additional person(s) sharing room: 2) \_\_\_\_\_  
Last Name First Name

3) \_\_\_\_\_ 4) \_\_\_\_\_  
Last Name First Name Last Name First Name

5) \_\_\_\_\_ 6) \_\_\_\_\_  
Last Name First Name Last Name First Name

**PRICE FORMULA FOR THE SUITES:** Cost of Suite per night \_\_\_\_\_, plus \$10 resort fee, plus 3<sup>rd</sup> person cost \$20, plus 4<sup>th</sup> person cost \$20. (add \$20 for each additional person) plus the 13% tax for the total of that listed above.

**PRICES FOR REGULAR ROOMS AND UPGRADED ROOMS:**

**Convention Rates (per night):** **Single/Double (Floors 1-16)** \$89 plus \$10 resort fee and 13% tax = **\$111.87** total; **Triple** \$89 plus \$10 resort fee plus \$20 third person and 13% tax = **\$134.47** total; **Quad** \$89 plus \$10 resort fee, \$40 third/ fourth persons and 13% tax = \$157.07 total. **Upgraded rooms (Floors 17-23)** **Single/Double** \$105 plus \$10 and 13% tax = \$129.95 total; **Triple** \$105 plus \$10 resort fee plus \$20 third person and 13% tax = \$152.55 total; **Quad** \$105 plus \$10 resort fee plus \$40 third/fourth persons and 13% tax = \$175.15 total. **Rollaway** add \$10/night. (These prices cannot be guaranteed for any reservation submitted after March 15, 2010.)

**REQUESTS:** Smoking  Roll-a-way  Refrigerator  Upgraded room (floors 17-23)   
 (There is a limited number of refrigerators available for rooms on floors 1-16. Priority will be based on medical need. Cost = \$5. Coffee pots and refrigerators are available in the rooms on floors 17-23.)

**The GRAND SIERRA RESORT – RENO, NEVADA** is authorized to use the credit card number below to bill all charges incurred during my stay. I understand I will be charged for the first night if I do not show on the scheduled arrival date. Upon check-out, please use my credit card (NOT DEBIT CARD) for payment unless I make other payment arrangements prior to my departure.

Type of Credit Card: Visa     Master Card     American Express     Discover

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Print Name as it appears on your card \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

If no credit card is used, a check for the total of the first night's charges must be attached to this reservation form. Check should be made payable to the Grand Sierra Resort .

Check or Money Order Enclosed     Amount \$ \_\_\_\_\_

Make three copies of this form. Keep one for your records and give the original and one copy to your Housing Chair. You may also wish to make copies for your roomies. Be sure you turn your form into your Housing Chair on or before the date noted at the top of this form.

Individuals need to send the original and an additional copy to the Regional Housing Coordinator (or give them to a local Housing Chair.)

**All reservation changes and cancellations must be made through your**

**Housing Chair, \_\_\_\_\_**

**or**

**Sue Booth, the Regional Housing Coordinator**  
**[sjhb@sbcglobal.net](mailto:sjhb@sbcglobal.net)            916.967.5505**

**or**

**Maxine Verma**  
**[msverma@yahoo.com](mailto:msverma@yahoo.com)            916.488.6877**

**Do not contact the hotel directly.**