

• THE HISTORIC •  
**GRAND VIEW LODGE**<sup>®</sup>  
 • ON GULL LAKE •

**RESERVATION FORM**

**MN Dental Association Women's Retreat**

October 23 – 25, 2015

MAIL OR FAX FORMS TO:

**Group Reservations Department/Grand View Lodge**  
**23611 Woodward Avenue**  
**Nisswa, MN 56468**  
**FAX: 218-963-9886**

**EMAIL: group.reservations@grandviewlodge.com**

**PREFERRED LODGING RATE HELD UNTIL SEPTEMBER 30, 2015.** Room Rates and availability after **SEPTEMBER 30, 2015** are **NOT GUARANTEED.**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Email: \_\_\_\_\_

*All confirmations will be sent via email (please be legible)*

**SPECIAL REQUESTS**

**Please select any special requests for lodging and/or meals:**

- Wheelchair Accessible     Impaired Mobility  
 Service Animal         Food Allergies

Explain: \_\_\_\_\_

**CANCELLATION/REFUND POLICY:**

*Cancelled Reservations received by **09/30/2015** will receive a full refund. NO REFUNDS will be issued if cancellation is received after **09/30/2015**.*

*When using a Purchase Order or Voucher, Cancellation/Refund Policy will apply.*

**PACKAGE RATES & DESCRIPTIONS**

**LODGING PACKAGE:**

Lodging Package lodging accommodations, meeting and meals.

\$306.45 Single Occupancy Attendee rate, per person, per day [GVL Single Occupancy consists of one attendee in a private bedroom and private bathroom]

\$221.96 Double Occupancy Attendee rate, per person, per day [GVL Double Occupancy consists of two attendees in a bedroom sharing one bathroom]

ROOMMATE(S): \_\_\_\_\_

**FORMS MUST BE SENT TOGETHER.** For your safety and security, Grand View will not assign roommates. If the 2<sup>nd</sup> Occupant is not indicated (or no form is received by deadline date), we will assign a single room.

**Note:** \*Rooms may be in a multiple bedroom unit. Resort check in time is 4:30 p.m. All rates are inclusive of 18% Service Charge and 6.875% State Sales Tax.

**EARLY ARRIVAL/POST STAY:**

I will be staying the following nights:

- Thursday (Early Arrival)     Sunday (Post Stay)

*\$187.91, per Night, per Room. Rate includes Minnesota State Sales Tax and **subject to availability.***

**PAYMENT INFORMATION**

**RESERVATIONS WILL NOT BE PROCESSED WITHOUT PAYMENT**

*Full Payment of Stay is Required*

Purchase Order No. \_\_\_\_\_  
 (Copy of Purchase Order **must** be submitted with Reservation Form)

Check payable to Grand View Lodge.

- Credit Card (Card will be charged for payment in full.)  
 Visa     MasterCard     Discover     AmericanExpress

Billing Name \_\_\_\_\_

Address (must include zip code) \_\_\_\_\_

Last 4 digits on the card \_\_\_\_\_

Phone Number (to process payment) \_\_\_\_\_