

IMPORTANT
MAINE CHIROPRACTIC ASSOCIATION SPRING CONVENTION
SAMOSET RESORT
ROCKPORT, MAINE
May 2, 3 & 4, 2008
ROOM RESERVATIONS

Note Deadline

Rooms reserved after April 7, 2008 will be on a space available basis only. Accommodations must be made promptly so that we may determine the number of rooms needed. Please reply as soon as possible.

Name of Company: _____ Name of

Representative (s): _____

Address: _____

Street	City	State	Zip
Telephone number: _____		Total number attending: _____	

<u>Rates per day includes 7% sales tax:</u>	<u>Mark number of rooms needed for each night</u>
<u>Single Room (1 person)</u>	<u>Friday</u> <u>Saturday</u>
\$129.00 (Includes sales tax)	_____ _____
<u>Double Room (2 people, 2 beds)</u>	<u>Friday</u> <u>Saturday</u>
\$129.00 (Includes sales tax)	_____ _____

Complete this form, and the meal package form, if applicable, and include a check for the full amount.

Make checks payable to the Maine Chiropractic Association and mail to:
Mr. John Royce
100 Albee Road
Augusta, ME 04330

Do not send this to the hotel. * No rooms will be issued on hotel contact.