

2017-2018 Trustee Training Conference Reservation Form

October 20-22, 2017

Best Western Plus Heritage Inn Rancho Cucamonga/Ontario, 8179 Spruce Ave., Rancho Cucamonga, CA 91730 909-466-1111 and the Kiwanis Professional Center, 8360 Red Oak St., Rancho Cucamonga, CA 91730

Name: Trustee of Region #:
Address:
(include city, state, and zip)
Preferred Contact Number: E-mail address:
Arrival Date: Departure Date: Departure Time:
I am flying and will need transportation. (The Best Western provides a complimentary shuttle from the airport to the hotel and bacto the airport. Please call 909-466-1111 a few days prior to your flight to pre-arrange a shuttle reservation.)
I am driving and can provide transportation, if needed. How many can you transport?
I will attend the training and be housed two to a room with another Trustee of the same gender.
My roommate preference is
Private hotel room requested @ \$147.00 = \$
Spouse/Guest Name (only if attending):
Extra nights lodging @ \$98.00 per night = \$(Included nights are Thursday, Friday and Saturday)
I will not need housing at the hotel. I will be unable to attend.
Meals: Please note, provided meals for Trustees and District Officers during the retreat include Friday lunch and dinner, Saturday lunch and dinner and Sunday lunch. Breakfast is included for those staying at the hotel. Thursday dinner is on your own. Alcoholic beverages during dinner may be purchased on your own. If you choose to bring a spouse/guest, all meals need to be paid for with proper payment. Please indicate below which meals they will attend and we will inform you the cost of the meals. If for some reason you will not be attending an included meal, please indicate which meal below so we may exclude you from the meal count. I will attend all meals and be included in the meal counts. Or, please indicate which meals your spouse/guest will be attending or which meals you will not be attending:
If you wish to use your Visa, MC, AMEX or Discover card, Total Enclosed = \$
Cardholder Name Signature
Card Number Expiration Date Security Code*
If your credit card billing address is different than the address listed above, please include the address on the line below. Thank You.
If you have special dietary, housing or accommodation needs, please explain (i.e. vegetarian meals, handicapped accessible room, late arrival/early departure, etc.): If you prefer to pay by check, please make check payable to and mail a copy of the submitted form to:

Cal-Nev-Ha Kiwanis, 8360 Red Oak St., Suite 201, Rancho Cucamonga, CA 91730 or fax to 909-989-7779.