## Sweet Adelines Hotel Registration Form-Great Lakes Harmony Region#17 Sweet Adelines International



# Winter Harmony Weekend with Diane Porsch – February 3-5, 2017 THE LODGE AT SAWMILL CREEK, HURON, OHIO

## **HOUSING DEADLINE – January 12, 2017**

Chorus Name	Housing Chair							
Address	City	City						
Phone (day)	(evening)	Email						
Payment Method: If Master Bill, name of	Master Bill (1 bill for all chorus rooms)  "person paying bill"	Individual Bills (choru	is members pa	ay their own bills)				
ROOM RATES:	Individual: \$108.10/night (includes al	,	s's tax exemi	nt form)				

#### **HOUSING FORM INSTRUCTIONS:**

- · Please print or type names and clearly mark those rooming together with a bracket or leave a space between each group rooming together.
- · Include the expiration date and name of card holder with each credit card number
- · Check room size required & nights required and type of payment
- · Codes for housing form are as follows:
  - o ROOM SIZE S Single, D-Double
  - o SPECIAL REQUESTS R Rollaway, NS Non-Smoking, S Smoking, H Handicapped Accessible
- · No rooms will be reserved without a credit card hold or a check for one night's deposit per each room requested.

#### When complete, send this page and all pages of the reservation form to:

Sue Heck (Sue will be forwarding the housing forms that are sent via mail for Cathy Dunlap who will be out of state part of Jan.)

Sue Heck 5229 Dungannon Cr NW North Canton, OH 44720 Ph: 330-324-2391

IF SENDING FORM VIA EMAIL, send to Cathy Dunlap at cdunlap1969@gmail.com

#### **HOTEL INFORMATION & REGULATIONS:**

- Tax Exempt Eligibility If a chorus pays for rooms with a chorus-owned credit card (with the chorus name on the card), they could be eligible for tax exempt status. This applies to all out of state choruses. To be eligible, a tax exempt form must be sent along with the housing form. Tax exempt status will not be granted without this form. The room rate will be \$101.89 per night per room if tax exempt status is granted and \$108.10/night if not tax exempt.
- The hotel requires a one night deposit for each room or credit card number (remember to include expiration date and name of card holder)
- · If paying by check, please make check payable to THE LODGE AT SAWMILL CREEK. Check in time is 4:00 P.M. Check out time is 11:00 A.M.
- · Payment for rooms must be made before departure from the hotel.
- \*\*\*Cancellations or changes after January 12, 2017 must be made with the HOTEL DIRECTLY
- (419)-433-3800. There is a 72 hour cancellation policy. Cancellations within 72 hrs. will be charged accordingly.

If you have any questions, please contact Cathy Dunlap at 330-936-4061 or <a href="mailto:cdunlap1969@gmail.com">cdunlap1969@gmail.com</a>. Thank You.

All forms will be available on Region 17 Website. Mark your calendars now. Our weekend Facilitator will be Diane Porsch. Weekend schedule and speaker bio will be available on website. Thank you in advance for your timely returns of the housing and registration forms.

## WINTER HARMONY WEEKEND WITH DIANE PORSCH FEB. 3-5, 2017 THE LODGE AT SAWMILL CREEK RESORT 400 SAWMILL CREEK, HURON, OH 44839 HOUSING DEADLINE – January 12, 2017

## **CHORUS NAME**

IMPORTANT: Please PRINT or TYPE			2 F	1 k	На	Th	Fri	Sa	Credit Card info (Number and	
PUF			Full Beds	King Bed	Handicap	Thursday	Friday	Saturday	Exp. Date) From 1 person per room or 1 chorus credit card for all rooms. REQUIRED BY HOTEL	
	Last Name,	First Name							REQUIRED DT HOTEL	
	1									
Room	2									
	3									
	4									
	1									
Room	2									
	3									
	4									
	1									
<u>Room</u>	2									
	3									
	4									
	1									
<u>Room</u>										
	2									
	3									
	4									
<u>Room</u>	1									
	2									
	3									
	4									
Taxable	e Rate Per Room		<u> </u>	<u> </u>		<u> </u>				
		2 per room pe	r perso	n			per pers	son	4 per room per person	
		\$54.05				\$36.04			\$27.03	
Tax Ex	Tax Exempt Rate per Room									
1 person per room 2 per room		2 per room pe \$50.95	er person			3 per room per person \$33.97		son	4 per room per person \$25.48	
\$101.89   \$50.95   92.00 ± (mandatory 3.75% resort fee and 7% b										

## **BLANKET CERTIFICATE OF EXEMPTION**

The undersigned hereby claims exemption to purchases of tangible personal pr	operty from
	on and after
NAME OF VENDOR	
	and certifies that this claim
DATE	<del>_</del>
is based upon the purchaser's proposed use of the items purchased, the activity	of the purchaser, or both, as shown hereon:
Granted exemption from federal income tax	as an IRS 501 (c)(3)
charitable non-profit organization	
PURCHASER MUST STATE STATUTORY REASON FOR CLAIM	ING EXEMPTION OR EXCEPTION
This certificate shall continue in force until revoked and shall be considuendor unless the order specifies otherwise.	ered a part of each order given to the above named
(Purchaser's Name)	
(Purchaser's Activity, i.e., Manufacturer, Public Utility, Church, etc.)	
(Purchaser's Address)	
-Finance Coordinator	
(By – Signature and Title)	
(Date Signed)	
N/A Tax ID#	_
(Vendor's License, if any)	