

OUT OF STATE HOUSING FORM



A copy of this form must be sent to the Registration Chairpersons - Nell & Bob Miller

DUE DATE:

Postmarked by February 24, 2012

GRAND ASSEMBLY: March 31 - April 3, 2012

No refunds after this date

All Supremes and One Trailer, All Grand Worthy Advisors and Grand Representatives to California are guests of Grand Assembly Housing for 3 nights between March 31 - April 2, 2012

Name _____ Title _____

Address _____ City _____

State _____ Zip _____

Contact Person _____ Phone (____) _____

Email _____ Cell (____) _____

Type of Accommodations King Queen Double Queens Twin

Arrival _____ (Date) _____ (Time) Departure _____ (Date) _____ (Time)

IMPORTANT NOTICE

ALL PERSONS attending Grand Assembly are to make reservations through the Housing Chairpersons. This is extremely important as it makes a difference in our cost for the Convention Center and is essential to security, communications and insurance. It is permissible for people to stay with friends/relatives, but Grand Assembly Housing needs to be advised of your location. All single young men between ages 11 and 30 must be housed at a separate hotel other than those housing girls. On a limited basis, some special rooms are made available for brothers of Grand Officers. Please contact Housing Chairpersons for special instructions.

The Headquarters Hotel will be the Radisson Hotel. A deposit of \$100.00 per room is required. Guest housing will be paid only on the basis of **four** girls to a room for **three (3)** nights. The **preferred method** is to enter a **valid credit card information** for the room deposits. The deposit is \$100.00 for each room requested. **For Each six girls, there must be one adult.**

1. _____ Title _____

Mr/Mrs/Miss

2. _____ Title _____

Mr/Mrs/Miss

3. _____ Title _____

Mr/Mrs/Miss

4. _____ Title _____

Mr/Mrs/Miss

If special room grouping is desired, please explain how you want to be housed. Use additional sheet if necessary. Please write "**GUEST**" in front of name, if it applies.

Please mail this form to:

Shirley Redman, Housing Chairperson

1105 West Fremont Ave. Fresno, CA 93711-1411

559-437-0101 Email: sarnjar@sbcglobal.net



Credit Card Type: Visa Master Card Card #: _____

Name shown on card: _____ Exp. Date: _____

(The hotels do not process credit cards until the day of check-in. If you do not show, you will be billed for the first night.)