

Hotel Reservation Form

2010 Mid-America PETS

Friday and Saturday, March 19 & 20, 2010

Holiday Inn City Center
700 Rogers Avenue, Fort Smith, AR 72901
Phone: 479-783-1000 Fax: 479-783-2709
www.holiday-inn.com/ftsmithar

Please complete the form below in full.

The Reservation Form must include credit card number, expiration date and your signature or check with payment for one (1) night's stay

Fax this form or mail to the above address.

Call before February 26, 2010 for the Rotary rate and when calling to make reservations

A) Ask for in-house reservations, B) Mention Mid-America PETS

Name _____

Address _____

City, State, Zip _____

Business Phone _____ Fax _____

Home Phone _____ Email _____

Arrival Date _____ Departure Date _____

Name of person sharing accommodations _____

Credit Card Number _____ Expiration Date _____

"I authorize the Holiday Inn City Center to charge my account for one night's deposit."

Signature _____

Date: March 19-20, 2010
Rate: \$107.40 (\$94.00 plus 14.25% tax)

Cut-off Date: February 26, 2010

Indicate room preference:

DD or Queen

Non-Smoking

DD or King

Smoking

Room reservations requested beyond cut-off deadline are subject to availability. Room may still be available after the cut-off deadline but not necessarily at the discounted group rate. Also, if contracted block is filled before cut-off deadline, rate may be higher.

Our goal is to satisfy all room type requests. Requests are handled on a first-come, first-served basis.