1985

Lodging and Transportation Information

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BUS RESERVATION FORM

Name ____________________________________________
Address __________________________________________________________________________
City _________________________ State _________ Zip ______
Telephone ( ) ____________________

Check all that apply:
From O'Hare Airport to Lake Lawn Lodge
   ___ Wednesday, 10/16/85 at 4:30P.M. ($8.00)
   ___ Thursday, 10/17/85 at 2:00P.M. ($8.00)
   ___ Thursday, 10/17/85 at 4:00P.M. ($8.00)

From Lake Lawn Lodge to O'Hare Airport:
   ___ Sunday, 10/20/85 at 1:30P.M. ($8.00)

TOTAL AMOUNT ENCLOSED $__________

Please mail this completed form and your check (payable to 1985 POD/NCSPOD Conference) no later than September 1, 1985 to: Robert G. Pierleoni, Rush Presbyterian St. Luke's Medical Center, University Office of Continuing Education, 600 S. Paulina Street, Chicago, IL 60612.
RESERVATION REQUEST FOR P.O.D./N.C.S.P.O.D. ANNUAL MEETING

OCT. 16-20 1985

(NAME OF GROUP)

ARRIVAL DATE AND TIME __________________________ Check-In is 4:00 P.M. (Local Time)

DEPARTURE DATE __________________________ Check-Out is 2:00 P.M.

ROOM RATE INFORMATION . . . SINGLE □ $ 84.00 per person TRIPLE □ $ 65.00 per person

DOUBLE □ $ 65.00 per person QUAD □ $ 65.00 per person

Per Night

A Deposit of $50.00 per room must be received by Sept. 16, 1985 to secure a reservation; PHONE CALLS CANNOT BE ACCEPTED.

DEPOSIT REFUNDABLE IF RESERVATION IS CANCELLED 72 HRS. PRIOR TO ARRIVAL.

NAME ________________________________

(PLEASE PRINT)

ADDRESS ________________________________

CITY __________________________ STATE __________ ZIP _______

PHONE (_____) ____________________

SPECIAL REQUESTS: