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April 3, 2006

## 40<sup>TH</sup> ANNUAL CONVENTION AND GENERAL MEETING RESERVATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone Number: {    } \_\_\_\_\_

Zone/Decentralized Association: \_\_\_\_\_

Position Held in Association: \_\_\_\_\_

Are you a Voting Delegate?      Yes {    }      No {    }

**If you are bringing your spouse, guest or children please complete the information below:**

Spouse or Guest: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

## ARRIVAL AND DEPARTURE DATE

Please indicate the day you will be arriving at Cleveland's House. **Thursday, June 15, 2006 is the official start of our Convention.**

Arrival Date: \_\_\_\_\_

I will be arriving for: Breakfast {    }    Lunch {    }    Dinner {    }    After Dinner {    }

**If you are leaving the Convention prior to Sunday, June 18, 2006 please indicate the day and time of your departure.**

Departure Date and Time: \_\_\_\_\_

## DELEGATE/GUEST CONVENTION RATES

Adults: \$140.00 per person per day based on double occupancy plus 5% PST, 7% GST and 15% Service Charge

**NOTE: AN ADULT IS ANYONE 18 YEARS OF AGE & OLDER**

Single Occupancy: \$155.00 per person per day plus 5% PST, 7% GST and 15% Service Charge

Ages 11-17: \$72.00 per person per day plus 5% PST, 7% GST and 15% Service Charge

Ages 3-10: \$50.00 per person per day plus 5% PST, 7% GST and 15% Service Charge

2 Years of Age & Under: **NO CHARGE**

## CONVENTION REGISTRATION FEE/ROOM DEPOSIT

**A \$53.50 (GST INCLUDED) REGISTRATION FEE PER ADULT AND A \$50.00 DEPOSIT FOR EACH ROOM RESERVED MUST ACCOMPANY THIS RESERVATION FORM.** Please be aware that the Registration Fee has nothing to do with your accommodation deposit.

## SUMMARY

Registration Fee: \_\_\_\_\_ Adults @ \$53.50 (GST Included) each = \$ \_\_\_\_\_

We require \_\_\_\_\_ Rooms @ \$50.00 each = \$ \_\_\_\_\_

**TOTAL AMOUNT** \$ \_\_\_\_\_

## METHOD OF PAYMENT

Please indicate: Cheque { } Money Order { } \*\* VISA { } \*\* Mastercard { }

**\*\* NOTE: IF YOU ARE PAYING BY CREDIT CARD, PAYMENT WILL BE PROCESSED TO YOUR CREDIT CARD ON THE DATE WE RECEIVE THIS RESERVATION FORM**

Payment is enclosed in the amount of \$ \_\_\_\_\_

Credit Cardholder's Name: \_\_\_\_\_  
(PLEASE PRINT)

Credit Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_  
(APPROVAL FOR PAYMENT BY CREDIT CARD)