ROCKY MOUNTAIN ASSOCIATION OF FAIRS COLORADO ASSOCIATION OF FAIRS & SHOWS COMBINED ANNUAL CONVENTION, November 8-11, 2017 Hotel Eleganté, Colorado Springs, Colorado

RETURN COMPLETED FORM TO:

RMAF
PO BOX 77, FILER, ID 83328

or

rmaf@filertel.com

COMPANY NAME
MAILING ADDRESS
CITY & ST/PROVINCE
EMAIL ADDRESS
PHONE

ALL SERVICE MEMBER ROOM RESERVATIONS MUST BE MADE THROUGH THE RMAF OFFICE & ARE SUBJECT TO AVAILABILITY Reservations will be accepted until room block is full

\$100.00 per night + 10.25% tax Guarantee with Credit Card Required
The Hotel Eleganté does not accept check

ROOM TYPES AVAILABLE: 2 Queen Beds & 1 King Bed

A 72-hour cancellation policy is in effect to avoid room charge.

Registration Refund Information:
Before October 7 = Full Refund
October 8—October 31 = \$150 Refund
After October 31 = No Refund

NEW ATTENDEE	1 VOTING DELEGATE	NAME (As you wish it to appear on name badge)	TITLE <u>As you wish it to appear on name badge</u> (Agent, Entertainer, Guest, etc.)	FULL REGISTRATION	DAY REGISTRATIONS (Wednesday, Thursday, Friday or Saturday)	HOTEL RESERVATION ARRIVAL DATE	HOTEL RESERVATION DEPARTURE DATE	EMAIL ADDRESS

Rocky Mountain Association of Fairs, the Rocky Mountain Association of Fa	, a current member, in good standing, of the Rock ation of Fairs Convention, do hereby agree to indemnity and save and hold harmles ir Board of Directors and their staff, sponsors and any other persons or entity associat any injury or action while involved with the Rocky Mountain Association of Fairs Cor
Signature	Date

DAY REGISTRATIONS (Includes meals)	FULL REGISTRATION (Includes meals)	
WEDNESDAY \$60.00	By October 7 = \$250.00	
THURSDAY \$90.00	After October 8 = \$275.00	
FRIDAY \$90.00	ONSITE REGISTRATION	
SATURDAY \$90.00	\$300.00	

CONVENTION PAYMENT INFORMATION

ITEM	QUANITY	RATE	TOTAL
CONVENTION REGISTRATION—FULL			
DAY REGISTRATIONS—DAY(s) Wed.			
DAY REGISTRATIONS—DAY(s) T, F, S (Circle Days)			
POP-UP DISPLAY RESERVATION	1 per Organization	\$25.00	
ADVERTISING—AD SIZE (
SPONSORSHIP—LEVEL ()			
TO			
Cell Phone # for on-site contact			

FOR OFFICE USE ONLY	
RECEIVED	-
PAID	-
ROOM #	-
SPONSOR	-
AD COPY	-

	We Accept VISA, MASTERCARD, DISCOVER & AMEERICAN EXPRESS
Check/MO	Payable to RMAF
CREDIT CARD #	
3 DIGIT CODE	EXPIRES
BILLING ADDRESS & ZIP	
NAME ON CARD	
SIGNATURE	