

UCD COSMO 2006 CONFERENCE
 Sunday, September 24 to Friday, September 29, 2006

RDP = UCDCOSMO
 Leader - 334019
 Confirmation # - 274

NAME: _____

INSTITUTE: _____ DEPARTMENT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____

PHONE: _____ FAX: _____

STATUS: Attendee Speaker Sex: M F Other: Smoker Non-smoker

Arrival day/date _____ Departure day/date _____

ALL PARTICIPANTS MUST BE REGISTERED WITH GRANLIBAKKEN AND MUST PARTICIPATE IN ONE OF THE FOLLOWING PACKAGES:

Registration Fees \$100 – STUDENTS \$150 – NON-STUDENTS RG

CONFERENCE ACCOMMODATIONS PACKAGES:

Lodging descriptions and meals:	9/24-29/06 5 Night Rate	Try not to sell Daily Rate																		
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Sun</td> <td style="text-align: center;">Mon</td> <td style="text-align: center;">Tue</td> <td style="text-align: center;">Wed</td> <td style="text-align: center;">Thu</td> <td style="text-align: center;">Fri</td> </tr> <tr> <td style="text-align: center;"><u>9/24</u></td> <td style="text-align: center;"><u>9/25</u></td> <td style="text-align: center;"><u>9/26</u></td> <td style="text-align: center;"><u>9/27</u></td> <td style="text-align: center;"><u>9/28</u></td> <td style="text-align: center;"><u>9/29</u></td> </tr> <tr> <td style="text-align: center;">D</td> <td style="text-align: center;">BLD</td> <td style="text-align: center;">BLD</td> <td style="text-align: center;">BLD</td> <td style="text-align: center;">BLD</td> <td style="text-align: center;">BL</td> </tr> </table>	Sun	Mon	Tue	Wed	Thu	Fri	<u>9/24</u>	<u>9/25</u>	<u>9/26</u>	<u>9/27</u>	<u>9/28</u>	<u>9/29</u>	D	BLD	BLD	BLD	BLD	BL	<ul style="list-style-type: none"> ◆ 5 breakfasts ◆ 5 lunches ◆ 5 dinners 	<ul style="list-style-type: none"> ◆ 1 breakfast ◆ 1 lunch ◆ 1 dinner
Sun	Mon	Tue	Wed	Thu	Fri															
<u>9/24</u>	<u>9/25</u>	<u>9/26</u>	<u>9/27</u>	<u>9/28</u>	<u>9/29</u>															
D	BLD	BLD	BLD	BLD	BL															
<input type="checkbox"/> Standard room single occupancy (bedroom or room in townhouse)	\$ 984.00 CFE1	\$196.80 CFE1																		
<input type="checkbox"/> Spouse/guest _____ @ _____	\$ 300.00 GST1	\$ 60.00 GST1																		
<input type="checkbox"/> Standard room double occupancy, per participant rate:	\$ 744.00 CFE2	\$148.80 CFE2																		
<input type="checkbox"/> Deluxe room single occupancy (studio or Executive Lodge):	\$1,194.00 CFE1	\$237.60 CFE1																		
<input type="checkbox"/> Spouse/guest _____ @ _____	\$ 300.00 GST1	\$ 60.00 GST1																		
<input type="checkbox"/> Deluxe room double occupancy, per participant rate	\$ 858.00 CFE2	\$171.60 CFE2																		
<input type="checkbox"/> Pavilion room triple/quad occupancy, per participant rate	\$ 534.00 VAL4	\$106.80 VAL4																		
<input type="checkbox"/> Off grounds rate is for any participant who will be attending the meeting but not staying at Granlibakken. Includes all meals, use of the facilities, parking and 20% tax and service.	\$ 420.00 CFBB	\$ 84.00 CFBB																		

I will be sharing lodging with _____

Please assign a roommate: Male Female Smoker Non smoker

Granlibakken will make every effort to accommodate all requests for double occupancy; however, in the event a roommate is not available, the single rate will apply.

Special dietary or lodging restrictions _____

TRANSPORTATION from the Reno/Tahoe Airport is available at a cost of \$35.00 per person, each way, with a minimum of \$70.00 per trip (single rider). 7 days prior notice and prepayment are required.

- Transportation cancellations received less than 24 hours prior to arrival or departure are non-refundable.

_____ @ \$35.00 PP = \$ _____
ARR DAY/DATE AIRLINE/FLT NO. ARR TIME # PEOPLE

_____ @ \$35.00 PP = \$ _____
DEP DAY/DATE AIRLINE/FLT NO. DEP TIME # PEOPLE

TOTAL PACKAGE PRICE (including transportation) = \$ _____

- A \$100.00 per person deposit is due at the time of booking.
- Full prepayment is due by **September 10th**. Please remit payment to: Granlibakken Conference Center, P.O. Box 6329, Tahoe City, CA 96145, or call (800) 543-3221.
- Reservations are due by **August 24th** and any reservations received after this date are on a space available basis.
- CANCELLATION** at any time is subject to a \$10.00 handling fee. Reservations canceled after **August 24th** are charged \$100.00 per person.
- No shows are charged 2 nights at the package rate. Participants who check-in a day late or checkout a day early are charged the full package rate unless the alternate arrival/ departure dates are confirmed 72 hours in advance.
- Lodging room check in time is 4:00 p.m. and checkout time is 11:00 a.m.

CREDIT CARD # _____ EXP. DATE _____

NAME ON CARD: _____

Granlibakken Conference Center @ Lake Tahoe
P. O. Box 6329
Tahoe City, CA 96145

800-543-3221
530-583-7641 (fax)
reservations@granlibakken.com
www.granlibakken.com