

# Border Lakes Region 2

Sweet Adelines International  
2012 Regional Convention

## HOUSING FORM

CHORUS NAME _____			
Contact Person _____	Contact Phone No. (____) _____		
Email for Contact person: _____			
Address _____	City _____	State/Province _____	Zip/Postal Code _____
Will your Chorus be arriving by bus? _____ Estimated time of arrival _____			

- Please send two (2) copies of your housing form to the address below. (Be sure to keep a copy for your files as well!)
- Contact person information must be filled out COMPLETELY and CLEARLY. *Forms that are not filled out completely will be returned.*

### **THIS FORM MUST BE POSTMARKED BY FEBRUARY 11, 2012**

Mail completed forms to: Donna Brichta  
3611 Kingsway Dr.  
Highland, MI 48356  
Ph: (248) 887-6038  
Email: [dreamchaser1951@comcast.net](mailto:dreamchaser1951@comcast.net)

***NOTE: ANY ROOM CHANGES AFTER MARCH 24, 2012 HAVE TO BE MADE DIRECTLY WITH THE HOTEL.***

- All forms are to be filled out COMPLETELY, including FIRST and LAST names of EVERYONE staying in rooms. Number of days that each person is staying must be indicated
- For each room, specify smoking or non-smoking.
- NO CROSSING OUT or WHITING OUT of information. PLEASE fill out a completely NEW form
- Please HIGHLIGHT special requests
- Rooms that are to be connecting or adjoining are to be in boxes NEXT TO EACH OTHER. Do not use arrows, lines, etc to indicate these rooms. HIGHLIGHT these rooms
- ALL CREDIT CARD PAYMENTS MUST HAVE AN AUTHORIZATION FORM ATTACHED (Only one card per room please.) Send the original signed credit card authorization (one copy only)

- Please put the room number on the credit card authorization forms and attach them in the same order as your rooming list.
- If you are using a CHORUS CREDIT card, there must be a credit card authorization form filled out with the proper information
- If you are using a MICHIGAN TAX EXEMPT number, you must have a CREDIT CARD or CHECKING account with the chapter name on it. This must be indicated when making your housing reservations
- Canadian chapters may apply for a MICHIGAN TAX EXEMPT number.
- If paying by check, make check payable to Hyatt Regency Dearborn for the total amount of your stay.
- You can change your method of payment when you check out of the hotel.  
REMINDER: All room charges are in U.S. Funds.
- NO signs or decorations on the doors. Security will remove them (fire hazard)

PRINT CLEARLY

Room 1 - NAMES

TH F S

Room 2 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 3 - NAMES

TH F S

Room 4 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 5 - NAMES

TH F S

Room 6 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 7 - NAMES

TH F S

Room 8 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 9 - NAMES

TH F S

Room 10 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

PRINT CLEARLY  
Room 11 - NAMES

TH F S

Room 12 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room13 - NAMES

TH F S

Room 14 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 15 - NAMES

TH F S

Room 16 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 17 - NAMES

TH F S

Room 18 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 19 - NAMES

TH F S

Room 20 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

**PRINT CLEARLY**  
**Room 21 - NAMES**

**TH F S**

**Room 22 - NAMES**

**TH F S**

CREDIT CARD					CREDIT CARD				
SMOKING	NONSMOKING			SMOKING	NONSMOKING				

**Room 23 - NAMES**

**TH F S**

**Room 24 - NAMES**

**TH F S**

CREDIT CARD					CREDIT CARD				
SMOKING	NONSMOKING			SMOKING	NONSMOKING				

**Room 25 - NAMES**

**TH F S**

**Room 26 - NAMES**

**TH F S**

CREDIT CARD					CREDIT CARD				
SMOKING	NONSMOKING			SMOKING	NONSMOKING				

**Room 27 - NAMES**

**TH F S**

**Room 28 - NAMES**

**TH F S**

CREDIT CARD					CREDIT CARD				
SMOKING	NONSMOKING			SMOKING	NONSMOKING				

**Room 29 - NAMES**

**TH F S**

**Room 30 - NAMES**

**TH F S**

CREDIT CARD					CREDIT CARD				
SMOKING	NONSMOKING			SMOKING	NONSMOKING				

PRINT CLEARLY  
Room 31 - NAMES

TH F S

Room 32 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 33 - NAMES

TH F S

Room 34 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 35 - NAMES

TH F S

Room 36 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 37 - NAMES

TH F S

Room 38 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		

Room 39 - NAMES

TH F S

Room 40 - NAMES

TH F S

CREDIT CARD				CREDIT CARD			
SMOKING	NONSMOKING			SMOKING	NONSMOKING		