



Warmly Welcomes
International Association of Electrical Inspectors
 March 10-12, 2010

Arrival Date _____ Departure Date _____

Rate: \$95.00 Single or Double \$107.00 Signature Level

Room type requested: King Bed 2 Double Beds Signature Level

**if room type requested is not available, next available room type will be confirmed*

Name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

E-Mail Address: _____

HOTEL MUST RECEIVE RESERVATION FORM PRIOR TO February 12, 2010: Reservations received after February 12, 2010 are subject to availability and may not be eligible to receive the reduced group rate.

Please fill out the entire form and fax or mail with credit card information. Valid credit card including name as it appears on card, card number and expiration date required.

ROOM RATE: \$95.00 Single/Double per night \$107.00 Signature Level Upgrade (Rates are subject to 6% State and 6% Local Hotel Taxes).

Please note that we are a smoke free facility

Card Type: Visa MasterCard Discover American Express

Card Number: _____ Expiration Date: _____

Card Holder Name: _____

Authorized Signature: _____

925 S. Creyts Road, Lansing, MI 48917 Phone: 517-323-7100 Fax: 517-323-2180

CHECK-IN TIME: 3:00 PM
 CHECK-OUT TIME: 12 NOON

*Cancellations must be made with the hotel prior to 6:00 pm the day of arrival