

**CALLAWAY GARDENS
HOTEL REGISTRATION**

GEROGIA FUNERAL SERVICE PRACTITIONERS ASSOCIATION
MAY 11, 2008 – MAY 15, 2008

Please complete reservation form and return with one night's deposit by April 11, 2008

Note: Rooms will not be held for Georgia Funeral Service Practitioners Association after this date.

Send to: Callaway Gardens P.O. Box 2000 Highway 27 South, Pine Mountain, GA 31822

Please indicate number of accommodations desired:

Mountain Creek Inn:
_____ \$109.00 + TAX, per room, per night

ABOVE MEETING PACKAGE PLAN RATE IS QUOTED ON SINGLE OR DOUBLE OCCUPANCY, PER NIGHT, EUROPEAN PLAN AND INCLUDES THE FOLLOWING:

Accommodations, admission into the Gardens, in room daily coffee service, daily newspaper, phone access charges, and admission to Fitness Center.

Arrival date: _____ Departure date _____
Last Name: _____ First: _____
Company name or affiliation _____
Street address: _____
City: _____ State _____ Zip _____
Day Phone: (____) _____
Name of roommate (if applicable): _____

NOTE: RESERVATIONS WILL NOT BE HELD WITHOUT A ONE NIGHT'S DEPOSIT.

Please enclose a check or money order, payable to Callaway Gardens, or you may apply the deposit to an American Express, Master Card, Visa or Discover card amount. Please indicate amount enclosed or account number. Credit card deposits will be processed upon receipt.

Deposit amount enclosed: _____
Credit card number: _____ Expiration date: _____
Signature: _____

Please Note: Reservations may be canceled, or stay shortened, up to seven days prior to arrival; cancellations or shortened stays made within seven days of check-in or after arrival will result in forfeiture of your deposit.

4PM CHECK IN *** 11 AM CHECK-OUT
1-800-CALLAWAY FAX: (706) 663-5090**

