

PLEASE FILL OUT BOTH SECTIONS DO NOT SEPARATE THIS FORM RECEIPT # _____

U.S.C.O. INCORPORATED
50th ANNUAL CONVENTION
AUGUST 18 - 20, 2008
ONTARIO

DELEGATE CREDENTIAL FORM

HOLIDAY INN
3063 SOUTH SERVICE ROAD
BURLINGTON

CLUB NUMBER: _____ **CLUB NAME:** _____

DELEGATE: MR: [] MRS: [] MISS: [] **NAME:** _____

Package - including Banquet & Registration: Triple each 285.00 [] Double each 295.00 [] Single 360.00 []
Banquet & Registration **ONLY** \$95.00 []
Registration **ONLY** (non-refundable) \$60.00 []
Accommodation for Sunday, August 17, 2008 - **MEALS NOT INCLUDED** Double / Single per room \$105.00 []
Accommodation for Wednesday, August 20, 2008 - **MEALS NOT INCLUDED** Double / Single per room \$105.00 []

RECEIPT & CREDENTIAL SHOULD BE RETURNED

TO: _____

Address: _____ Postal Code: _____

**Please check your requirement and mail BOTH sections BEFORE JULY 11th, 2008 to:
THE UNITED SENIOR CITIZENS OF ONTARIO, 3033 Lakeshore Blvd. West, Toronto ON M8V 1K5**

NOTE: If you are sharing a room, please indicate with whom: _____

SPECIAL NEEDS: (i.e. allergies, meal restrictions, etc): _____

DO YOU HAVE A PROBLEM WITH STAIRS: YES [] NO []

PAYMENT FOR ACCOMMODATION FOR AUGUST 17TH AND/OR AUGUST 20TH MUST BE REMITTED WITH CREDENTIAL FORMS. **PLEASE PRINT CLEARLY ON ALL FORMS.**

Are you willing to assist with the election procedures: YES NO

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