

**PLEASE FILL OUT BOTH SECTIONS DO NOT SEPARATE THIS FORM RECEIPT # \_\_\_\_\_**

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

**VISITOR CREDENTIAL FORM**

HOLIDAY INN  
3063 SOUTH SERVICE ROAD  
BURLINGTON ONTARIO

**CLUB NUMBER:** \_\_\_\_\_ **CLUB NAME:** \_\_\_\_\_

**VISITOR:** 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.**

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