



MICHIGAN GUARDIANSHIP ASSOCIATION  
April 23-25, 2008

Please return this form to:  
Reservations Department  
Shanty Creek  
One Shanty Creek Road  
Bellaire, MI 49615

CHECK IN TIME:  
Guaranteed after 4pm  
CHECK OUT TIME:  
11:00am

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone( ) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Business Phone( ) \_\_\_\_\_

E-Mail address: \_\_\_\_\_ (For confirmation)

You are welcome to arrive early or extend your stay following this scheduled event. At times specified accommodations are not available prior to or following your event. If the room type requested is not available, we reserve the right to assign the next available room type and rate.

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ # Adults: \_\_\_\_\_ # Children: \_\_\_\_\_

Reservations must be received by March 23, 2008.

Please reserve the following accommodations

ROOM TYPE:	1 ADULT	2 ADULTS	3 ADULTS	4 ADULTS
_____ 1 bedroom suite	\$65	\$65	\$85	\$95

The above rates are Per Room, Per Day, plus 6% state tax, 4% resort fee and 2% local tax.

**THIS FORM MUST BE MAILED OR FAXED IN TO RECEIVE THE GROUP DISCOUNTED RATES.**

Deposit Policy: You must guarantee your room reservation with a major credit card for deposit or a check equal to first nights lodging per room. Credit card WILL BE charged for the above deposit. Debit cards are not accepted for deposit. Refund of your deposit will be made if cancellation occurs at least 5 days prior to arrival, less a \$10 handling fee.

Card number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature(required) \_\_\_\_\_

**(If sending a check, please notate on credit card line.)**

Shanty Creek will be sending you a written confirmation of this reservation request. Upon receipt, please review all information.

Do you have any special lodging requests?

\_\_\_\_\_ Barrier free \_\_\_\_\_ Non Smoking \_\_\_\_\_ Other(please indicate) \_\_\_\_\_

For questions and information call:  
1-800-678-4111 or FAX:231-533-7004