HOTEL RESERVATION FORM

Cattle Industry Annual Convention & NCBA Trade Show February 1-4, 2012 ● Nashville, Tennessee

■ ATTENDEE

■ EXHIBITOR

Reservation Cut-Off Date: January 4, 2012

MAIL TO:

NCBA/Nashville Housing Bureau c/o Gaylord Opryland Resort & Convention Center Attn: Reservations 2800 Opryland Drive Nashville, TN 37214 or Fax to: (615) 458-2595

Reservations will not be processed if form is incomplete. Keep a copy of this form for your records. Do not mail this form if you faxed it. Acknowledgements are emailed or faxed only to the name listed in field #5. This form is designed for reserving one hotel room—photocopy this form if you need more than one room. Please type or print clearly in black ink. If you wish to reserve your hotel room on-line, visit our website at www. BeefUSA.org.

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| 2. ROOM TYPE: Rooms are assign | ned first come/first so | erved | | | | | | | | | | | |
| E. ROOM I'I E. ROOMS are assign | | | m \$179.00 r | lus tax | | | | | | | | | |
| | | Standard Single/Double Room \$179.00, plus tax Garden Terrace Interior Deluxe Room \$193.00, plus tax | | | | | | | | | | | |
| | Garaen lene | ace interior ben | axe Room 913 | 75.00, plus tux | | | | | | | | | |
| 3. CHECK APPROPRIATE BOX: | One Person/ | One Bed | | | | | | | | | | | |
| S. CITECK AT FROT KIATE BOX. | Two People/One Bed Two People/Two Beds Total Number of People In Room: Hospitality Suite Requests: Contact NCBA at (303) 694-0305. The NCBA Housing Bureau will request room types based on availability. Hotel is non-smoking | | | | | | | | | | | | |
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| | | | | | | | 4. CHECK HERE FOR DISABILITY | , T L Bloom | s chocifu: | | | | |
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| 5. SEND ACKNOWLEDGEMENT B | r (check one) 🔟 Elvi | AIL OF FAX: | | | | | | | | | | | |
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| (Figure No. 1) | /h 4: 1 | | | | | | | | | | | | |
| First Name) | (Mid | dle Initial) | (La | st Name) | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Email Address) | | (Daytime Phone Number) | | | (Fax) 24-hour dedicated line | | | | | | | | |
| | | | | | (If International, indicate Co | ountry/City Code) | | | | | | | |
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| Affiliation/Company Name) | | | | | | | | | | | | | |
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| Street Address or P.O. Box Numb | oer) | | | | | | | | | | | | |
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| City) | (St | ate/Province) | (Country) | (Zip | Code or Postal Code) | | | | | | | | |
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| 5. LIST ALL ROOM OCCUPANTS (f | hrst & last name) | 1 | | 2 | | | | | | | | | |
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| 7 INDICATE EODM OF DAVIMENT | · All recornations rea | uiro a crodit car | d for the one | night room 8, tay g | uarantoo The hetel will be | ald your cradit | | | | | | | |
| 7. INDICATE FORM OF PAYMENT: | | | | | | ola your creat | | | | | | | |
| card for this guarantee but no cha | arges will be posted. | ii you do not p | rovide a credi | t card your form wil | i not be processed. | | | | | | | | |
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| Type of Card (AE, MC, VISA) Cred | it Card Number | | Exp. Date | Name on Card | Signature | | | | | | | | |
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| 3. List special needs or other req | uests: | | | | | | | | | | | | |
| Special requests cannot be guar | | their hest to | honor all re | guests and hased | on availability will assign | specific room | | | | | | | |
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CANCELLATIONS: Contact the NCBA/Nashville Housing Bureau until January 4, 2012. Reservations will be acknowledged by the NCBA/Nashville Housing Bureau within 3-5 days of receipt of this form. Make air reservations before filling out arrival/departure dates on this form. Please review and understand all cancellation policies and fees when making your reservation.