New Hampshire Association of Educational Office Professionals

North Conway Grand Hotel, North Conway NH May 1-3, 2024

Reservation Deadline: April 14, 2024 to receive group rate. Be sure to mention NHAEOP!

MAIL or FAX this form with deposit to: North Conway Grand Hotel – Attn: Sales

72 Common Court, North Conway, NH 03860 ~ Fax: 603-356-6028 ~

If interested, extended rates are available for: Tuesday, April 30 (\$99) and/or Friday, May 3 (\$129) plus taxes.

Guestrooms are subject to availability.

Package #1 / 2 Night Package* = Wednesday and Thursday overnight accommodations with 6 meals (Wednesday dinner, Thursday breakfast, lunch, and dinner, and Friday breakfast and lunch)

• _____ Single Occupancy = \$399.00 per person

• _____ Double Occupancy = \$299.00 per person

• _____ Triple Occupancy = \$286.00 per person

Quad Occupancy = \$274.00 per person

Package #2 / Thursday Night Package* = Thursday overnight accommodations with 4 meals (Thursday lunch and dinner, and Friday breakfast and lunch)

• _____ Single Occupancy = \$248.00 per person

• _____ Double Occupancy = \$191.00 per person

Triple Occupancy = \$181.00 per person

Quad Occupancy = \$175.00 per person

Day Tripper (Meals Only) Rates* (for 'meals only', please contact Gretchen Drost – 603-755-1402, gramgretch52@gmail.com or info@nhaeop.org ~ Breakfast = \$26.00; Lunch = \$31.00; Dinner = \$47.00

*Please note: rates are inclusive of NH State Room Tax and Housekeeping Fees/Services.

IF SHARING A ROOM, PLEASE FILL OUT ONE REGISTRATION FORM PER ROOM, NOT PER GUEST	
Arrival Date:	Departure Date:
Your Name:	
Name of Person(s) Sharing Room:	
Your Address:	
City: State: Zip	: Phone: Email:
(to be processed upon receipt of reservation valid credit card is required at check-in, rega	e price is due at time of booking. Deposits will be accepted by check or major credit card n form). Please make checks payable to: North Conway Grand Hotel. Please note that a ardless of payment type. An incidental hold of \$50 per night, per room will be authorized d within 48 hours of departure. Any outstanding balance of each room is required at
If more than one card will be charged; (i.e. f	or double occupancy), please fill in amount to charge and credit card information below:
Amount: \$ Che	eck MC VISA AMEX DISCOVER
Credit Card #	Expiration Date:
Name on Credit Card (include name of town	, if town card):
Amount: \$ Che	eck MC VISA AMEX DISCOVER
Credit Card #	Expiration Date:
Name on Credit Card (include name of town	, if town card):
	fee, notification must be received at least 15 days prior to the scheduled arrival date. A ee, will be given for a 3-14 day cancellation. No refunds given with a notification of 0-2 billed for full reserved stay.
CHECK-IN TIME = 4:00pm CHECK-C	DUT TIME = 11:00am (no late departures)
Guest Signature:	
Credit Card Signature (if different):	