



## REGISTRATION & ROOM RESERVATION FORM

### Arlington Wreath Laying Ceremony

Nov 8 – Nov 11, 2018

Thursday - Sunday

#### Head Quarters Hotel

Holiday Inn Rosslyn, Key Bridge

1900 North Fort Myer Drive

Arlington, VA 22209

Hotel Check in Time: 3:00PM



The guest room rate is \$109.00 + \$14.44 tax = \$123.44 per night. A ONE NIGHTS NON-REFUNDABLE DEPOSIT IS REQUIRED. The Housing Chairman must receive the completed registration form, NO LATER THAN AUGUST 19, 2018  
Parking is available at a reduced rate of 10.00 per day (normally \$20.00).

Forms received after AUGUST 19, 2018, are subject to availability.

Priority will be given to guests staying longer than one day. Rooms are assigned by a first come basis. So submit EARLY.  
A registration check for \$15.00 per person must accompany this form in U.S. currency \$ # People

#### RETURN COMPLETED ROOM FORM TO:

(NON REFUNDABLE)

William W. Chicky  
1950 County Road 245  
Georgetown, TX 78633

Cell Ph: 760-977-0726  
e-mail: [HousingChairman@IALOH.org](mailto:HousingChairman@IALOH.org)

Reservations are guaranteed by Credit Card or Personal Check for one (1) nights lodging  
Payable To: IALOH, William Chicky

ALL ROOM RESERVATIONS, CANCELLATIONS OR CHANGES IN RESERVATIONS  
MUST GO THROUGH THE HOUSING CHAIRMAN, WILLIAM CHICKY

THE HOLIDAY INN IS A NON-SMOKING HOTEL

Please Print

Last Name: \_\_\_\_\_ First \_\_\_\_\_ Lady: \_\_\_\_\_ Shrine Center: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home or Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Requests for certain rooms or room types are requests only. They are not guaranteed.

Guests will be charged from \$250-\$500 for smoking in non-smoking areas, including rooms.

You may smoke on the balcony if necessary, please close the door so smoke will not come into the room.

Please indicate the type of room preferred by checking your choice below.

☐ (KING BED EXECUTIVE) ☐ (TWO DOUBLE BED TRADITIONAL) ☐ (ONE DOUBLE BED, WHEEL  
CHAIR ACCESABLE) Special needs \_\_\_\_\_

Date of Arrival: \_\_\_\_\_ Date of Departure: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Please note your expiration date on your credit card. Hotels will not accept card if expiration date is passed.

These are a must to help with Registration and Transportation

Do you require bus transportation to the ceremony? YES: \_\_\_\_\_ NO: \_\_\_\_\_

Are you a first time attendee? YES: \_\_\_\_\_ NO: \_\_\_\_\_