



MSACF EXHIBITORS/2017

Meals & Lodging Registration Form

September 14 – September 17 Fair September 15– September 17 2017

/25271

We must have your completed form to make your reservation!

Email, Fax, or mail in your registration form. Email:

Name: _____ Telephone number: _____

Address: _____ City: _____ State: _____ Zip Code _____

E-mail address _____ Arrival Date: _____ Departure Date: _____

- Cedar Lakes is not responsible for assigning roommates.
- All rooms will be assigned on a first come-first serve basis!
- 24 hour cancellation notice required or you will be charged first night's lodging & first day's meals.
- All prices include 6% sales tax.
- If roommate does not show you are responsible for the total cost of your room.

Holt Lodge: Three night minimum stay for Holt Lodge

_____ Private (\$76.32 per night) _____ Double (\$38.16 per night) Roommate name _____

Mountaineer Motel:

_____ Private (\$63.60 per night) _____ Double (\$31.80 per night) Roommate name _____

Cedars, Lakes Motel: Please circle your choice.

_____ Private (\$53.00 per night) _____ Double (\$26.50 per night) Roommate name _____

Dormitory room: Need to bring blanket, sheets, pillow case, towels, wash cloth and soap. List roommates on back.

_____ 8-person dorm room \$15.90/night per person (this is an open dorm and will contain multiple people.)

_____ Family or business dorm room \$99.38 per night

_____ Set of sheets with pillowcase, 1 towel and 1 wash cloth \$5.30

_____ Name of dorm building if you have a preference.

Dormitory Conversion: (includes bedding, towels and maid service)

_____ 2 or 3 person dorm room \$26.50/night per person

Meals: Please mark the boxes for the meals you wish to have.

Meals & Prices	09/14 Thursday	09/15 Friday	9/16 Saturday	9/17 Sunday
Breakfast - \$6.63	N/A			
Lunch - \$8.22	N/A			
Dinner - \$9.54				

Payment for the first night's lodging must be received with registration. If paying by credit card, Cedar Lakes accepts Visa, Mastercard, and Discover. **Please make checks payable to Cedar Lakes.**

Credit Card # _____ Security Code _____ Exp. Date _____

Name on Credit Card/Signature _____

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