



COA ULTIMATE NATIONAL HOTEL REGISTRATION - APRIL 5 - 8, 2012

HOTEL REGISTRATION INFORMATION

- * Registration Forms, Deposits, and Room Lists must be in the COA office by January 9, 2012.
- * Final Payments must be received by February 1, 2012.
- * 25% Nonrefundable deposit must be submitted with the registration. If you are paying by check, make ONE check or money order payable to COA, LLC.
- * At any time should you cancel a room, you will forfeit your deposit
- * A \$30 "returned check fee", and the amount of the returned check, may be electronically deducted from your account upon presentation of your returned check from the bank.
- * A \$50 change fee will be assessed each time you make a change to the original hotel registration form.
- * The policy agreement must be signed before your registration will be processed.
- * Please fill out the Credit Card Authorization Form in its entirety, you will not be charged the 3% processing fee for your hotel registration.
- * Should a refund be made, you will be assessed the \$50.00 change fee. Your refund will not be processed until 4 - 6 weeks after the event.
- * We will accept a certified check, money order or credit card as forms of payment.

Hotel Cancellation Policy		Pricing Schedule	
Cancellation Date	Percent Refunded*	Date	Price
Prior to February 1, 2012	100% Refunded*	Prior to February 1, 2012	\$225
February 2 - March 4, 2012	25% Refunded*	After February 2, 2012	\$250
After March 5, 2012	No Refund		

*Less deposits, change fees, and late fees

Pricing includes all taxes, resort fees and parking

POLICY AGREEMENT

I have read COA's rules and policies in their entirety. I understand I am financially responsible for this entire registration. I agree to abide by the rules and policies stated. If my telephone number is placed on the National Do Not Call Registry, I grant COA, LLC permission to call me at the phone numbers listed herein.

Signature _____

MAIL OR FAX REGISTRATION TO:

COA 2012 Ultimate National Hotel Registration

11500 Champions Way ■ Louisville, KY ■ 40299

Fax: 877.968.5261 Phone: 800.252.4337

Do not mail your registration if you register by fax.

CONTACT INFORMATION

Team or Individual _____

Contact Person _____

Home Address _____

City/State/Zip _____

() _____

Home Phone _____

() _____

Work Phone _____

() _____

Cell Phone _____

() _____

Fax Number _____

E-mail address (if email address is provided, confirmations will be sent electronically)

ROOM BLOCK INFORMATION

	Quad	Triple	Double	Single	Total
Monday, April 2, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Tuesday, April 3, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Wednesday, April 4, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Thursday, April 5, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Friday, April 6, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Saturday, April 7, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Sunday, April 8, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Monday, April 9, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>
Tuesday, April 10, 2012	<input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	+ <input type="text"/>	= <input type="text"/>

Total Rooms

Price \$

Hotel Total \$

HOTEL INFORMATION

Due to the large number of requests at the COA Ultimate Nationals, hotels cannot guarantee special requests such as: adjoining rooms, rooms blocked on the same floor (especially large groups), rollaway beds, cribs, and rooms with views or balconies. Due to Florida Fire Code and Occupancy Law, rooms with 2 beds cannot accommodate a rollaway bed and may not house more than 4 people.

Room Type Information:

Quad	4 Names on Room List	2 Beds
Triple	3 Names on Room List	1 bed and twin pull-out
Double	2 Names on Room List	1 bed
Single	1 Name on Room List	1 bed



OFFICE USE ONLY

Type	Amount	Date	Initials

CALCULATE YOUR DEPOSITS

* 25% Deposit is due upon receipt of this registration

** Full payment due by February 1st 2012

X \$225 \$ Total Due

X 25%

\$ Deposit Due

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Organization Name: _____

List the check-in and check-out dates for each room.

Indicate room type: Quad = 4 people / room, 2 beds, Triple = 3 people / room, 1 bed & twin pull-out, Double = 2 people / room, 1 bed, Single = 1 person / room, 1 bed

List first AND last names of each guest.

<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #1</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #2</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #3</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____
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<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #4</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #5</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #6</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____
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<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #7</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #8</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #9</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____
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<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #10</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #11</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #12</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____
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<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #13</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #14</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____	<div style="background-color: black; color: white; text-align: center; font-weight: bold; padding: 2px;">Room #15</div> Check-in Date _____ Check-out Date _____ Room Type _____ First and Last Names (please print) 1. _____ 2. _____ 3. _____ 4. _____
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Duplicate Page As Necessary



2011 - 2012 Ultimate National Hotel Credit Card Payment Form

11500 Champions Way
Louisville, KY 40299
Phone: 1-800-252-4337
Fax: 1-877-968-5261

Program Name: _____

Contact Name: _____

Check in Date: _____

Check out Date: _____

COA allows you to pay for your Gaylord Hotel reservation by credit card. The credit card used **MUST BE IN THE NAME OF THE GYM, SCHOOL or CONTACT PERSON. NO EXCEPTIONS!** Please fill out the form below. Fax or mail this form in with your hotel registration form.

Type of credit card to be used:

Visa

MasterCard

Discover

Credit Card # _____ Expiration Date _____ CVV Code _____

Credit Card Billing Address _____

Amount To Be Charged _____ Cardholder's Phone Number _____

Cardholder's Name _____

Cardholder's Signature _____

Date Signed _____

1-800-252-4337

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