



Woodstock,  
Vermont

# The New England Association of Chiefs of Police, Inc.

## 91<sup>st</sup> Annual Training Conference

### Registration Form

September 11-14, 2016

#### Package "A"

- Single: \$753.72  
 Double: \$887.04

***This package includes:***

- 3 night accommodations
- Buffet breakfast each morning
- Banquet Dinner on Tuesday, all taxes and service charges

#### Package "B"

- Single: \$687.72  
 Double: \$755.04

***This package includes:***

- 3 night accommodations
- Buffet breakfast each morning
- **NO Banquet Dinner**

#### Hotel Information: Woodstock Inn & Resort

14 The Green, Woodstock, VT 05091

Reservations may be made by email: RSVP@woodstockinn.com or by fax: 802-457-6649 ATTN: Group Reservation Coordinator

Questions 802-457-6604

Please indicate that you are part of NEACOP.

All rooms are non-smoking and accommodate a maximum of 4 people. Children 17 and younger stay free. There is an additional \$30.00 per person per day charge for each additional adult over 2 in a room. Room type is not guaranteed.

The discounted room rate is guaranteed through August 1, 2016. Registrations made after this date may not receive the discounted rate. The block may be filled before this date.

Deposit/Cancellation Policy: A deposit of 50% of the total room charge plus tax and resort fee is required at the time of booking.

Cancellations must be received by 4pm (EST) 14 days prior to the date of arrival to avoid forfeiture of one night stay plus tax. All refunds are subject to a \$30 cancellation fee per room.

Check In: 3:00 p.m.

Check Out: 11:00 a.m.

Concierge: 802-457-6609

Athletic Club: 802-457-6656

Spa: 802-457-6697

Country Club: 802-457-6674

**Single Night's Accommodation: \$179.00** plus \$9 resort fee & tax  
**Banquet Dinner Only: \$50.00/person** plus tax and service charge (please select entrée below)

#### Attendee Information: *(please print or type)*

Name \_\_\_\_\_

Spouse/Roommate \_\_\_\_\_

Agency \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone/Cell \_\_\_\_\_

Email \_\_\_\_\_

Special Request(s) \_\_\_\_\_

**Bed Type Request:**  1 King  2 Queens/Doubles

#### **Banquet Entrée Choice** *(please indicate number of plates each):*

Beef \_\_\_\_\_  Salmon \_\_\_\_\_

#### **Payment:**

Quantity	Category	
_____	Member -	\$100.00
_____	Guest -	\$100.00
_____	Spouse -	\$35.00
	<b>Total Registration fees Due</b>	_____

Choose one of the following methods of payment:

- Check  Credit Card  
 MasterCard  Visa  American Express  Discover

Name as it appears on the card: \_\_\_\_\_

Credit Card#: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_