



**Celebrating 50 Years  
Faith, Fun, Friendship  
Sunday, July 18 – Saturday, July 24, 2010**

Please print information (prices quoted are per person). You must be a member or former member of CACI to attend.

Name \_\_\_\_\_ Name on Name Tag \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_

Phone: Day \_\_\_\_\_ Night \_\_\_\_\_ Cell \_\_\_\_\_ Email: \_\_\_\_\_

CACI of \_\_\_\_\_ Delegate  (yes) 1<sup>st</sup> CACI Convention  (yes)

Current Office Held: \_\_\_\_\_  Local/  Regional/ CACI

Male  Female  Smoker  Non-smoker Roommate:  Smoker  Non-smoker  Don't Care

Emergency Contact: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Please check if any apply to you:  Vegetarian  Allergic to seafood, shellfish  Gluten intolerance ADA Needs \_\_\_\_\_

Postmarked by:	May 1, 2010 – EARLY BIRD RATE	\$849	\$1260
	May 2 – May 15, 2010	\$874	\$1285
	May 16 – June 1, 2010	\$899	\$1310

**Subtotal** \$ \_\_\_\_\_

Extra nights –in Colorado Springs Double \$86.00 Single \$168.00 (Rate per person.)

(Indicate the dates below.)

\_\_\_\_\_ Thursday, July 15 \_\_\_\_\_ Friday, July 16 \_\_\_\_\_ Saturday, July 17  
 \_\_\_\_\_ Saturday, July 24 \_\_\_\_\_ Sunday, July 25 \_\_\_\_\_ Monday, July 26 \$ \_\_\_\_\_

**Chaplain's Fund Contribution** \$ \_\_\_\_\_

**ROOMMATES:** If you and a friend have agreed to room together, please specify below. If you submit a reservation form at a double rate and do not specify a roommate, an attempt will be made to match you with one.

However, a match cannot be guaranteed and additional costs may incur.

**Tours Total** \$ \_\_\_\_\_

Roommate's Name: \_\_\_\_\_ **Grand Total** \$ \_\_\_\_\_

**Reservations accepted after June 1, 2010 will be based on space available.**

**Cancellation fee: \$50.00 No refunds will be made after June 10, 2010.**

**Please make check payable to CACI. No post dated checks will be accepted.**

**ALL CHECKS MUST BE CASHABLE UPON RECEIPT.**

**ARRIVAL SCHEDULE:** Date \_\_\_\_\_ Time \_\_\_\_\_

*WAIVER OF LIABILITY*

In consideration of my authorized attendance and participation in the CACI Convention July 16 – July 27, 2010, I, intending to be legally bound, do hereby, for myself, my heirs and executors, and administrators and assigns, waive, release, and forever discharge any and all rights and claims which I may have or which may hereafter accrue to me against Catholic Alumni Clubs International, Inc. and any officer or member of said organization participating in, conducting, or responsible for the conduct of said convention, for any and all injuries suffered by me while traveling to and from this event or participating in this event. In the event that I choose to change my room status, roommate, or any aspect of my reservation after confirmation and without prior approval by the Convention Staff, I will agree to pay all charges generated by my changes and I agree that CACI is not liable for said incurred costs.

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

SEND COMPLETED RESERVATION FORM TO: **Mike Coogan 13517 Teakwood Lane, Germantown, MD 20874-1034 (301)916-6336**

For further information, please call Barbara Accordino (502)969-2272 EST or Rhonda Higgins (812) 284-4349

[baccordino@insightbb.com](mailto:baccordino@insightbb.com)

[rhiggins4349@esagelink.com](mailto:rhiggins4349@esagelink.com)