

Grand Imperial Conclave of Canada
83rd Annual Assembly – August 8 – August 9, 2018
Hilton Toronto Airport Hotel 5875 Airport Road, Mississauga ON

Sovereign Great Priory of Canada
135th Annual Assembly – August 10 – August 12, 2018
Hilton Toronto Airport Hotel 5875 Airport Road, Mississauga ON

Name: _____ Address: _____ City: _____ Prov: _____ Postal Code: _____

Ladies Name: _____ if attending. Email: _____ Tel: _____

Arrival Date: _____ Via: Car ___ or Airline: _____ Flight: _____ Arrival Time: _____

Attending: YES ___ NO ___

Attending: YES ___ NO ___

Conclave: _____ No.: _____ Rank: _____

Preceptory: _____ No.: _____ Rank: _____

Present Office: _____

Present Office: _____

Registration (ALL INCLUSIVE PACKAGE) **(includes Tour)**
(KNIGHTS COMPANION) \$150.00 (LADIES) \$150.00

Registration (ALL INCLUSIVE PACKAGE) **does not include KTCF Lunch**
(SIR KNIGHTS) \$150.00 (LADIES) \$150.00

OR

OR

- Registration Only (THURSDAY ONLY) \$50.00
- Wednesday's "Get Acquainted" \$35.00 ea ___ One or ___ Two
- Thursday Lunch Ticket \$35.00 ea ___ One or ___ Two
- Thursday (Harbour Cruise) tickets \$65.00 ea ___ One or ___ Two
- Single Banquet Tickets \$70.00 ea.

- Registration Only (SATURDAY ONLY) \$50.00
- Friday evening "Meet & Greet" \$35.00 ea ___ One or ___ Two
- KTCF Foundation Friday Lunch \$35.00 ea ___ One or ___ Two
- Saturday Men's Luncheon tickets \$35.00 ea
- Lady's Program and Luncheon (Saturday) tickets \$70.00 ea
- Single Banquet Tickets \$70.00 ea.

Grand Sovereign's Banquet (Thursday) state choice & number of meals

Number of meals: Beef ___ Fish ___ Chicken ___

Grand Master's Banquet (Saturday) state choice & number of meals

Number of meals: Beef ___ Fish ___ Chicken ___

Food Special Needs Only: _____

Food Special Needs Only: _____

Please make cheque for Registration payable to: "Annual Assembly 2018" (No Post-dated cheques or Credit Cards please)

OR

e-Transfer for Registration to: jwkopp@shaw.ca

NOTE: No refunds after July 28, 2018

Hotel Reservations must be made through the Registration Committee. A deposit of one night or Credit Card Guarantee is required.

Hotel Reservation below ___ or included with, (Name): _____ or I will NOT be staying in the Hotel (Signature): _____

Please complete the form below. Room Rates \$142.00, plus applicable taxes per night, single or double occupancy, **includes breakfast and free parking.**

Check in date: _____ Check out date: _____ Deposit \$ _____ Credit Card: Visa ___ Amex ___ MasterCard ___ Other _____

Card Number: _____ Expiry Date: _____

Name on Card: _____ Signature: _____

Room Type: One King ___ Two Queen ___ Suite (one queen) ___ extra for suite Hotel Special Needs Only! (if applicable): _____

Send form and payment either by Mail to: Jerry Kopp 423 Woodland Crescent SE, Calgary AB T2J 1J7 (430) 630-9973
or by Email to: jwkopp@shaw.ca

\$20 Late Fee payable on Registrations postmarked after July 20th

Hotel Reservations not guaranteed after July 20th