

THE HIGHLANDS RESERVATION FORM

Group Name: Tri-State Dental/Medical Society **Dates:** January 15-20, 2023

Reservations must be made utilizing this form and be received by December 16, 2022. Reservation requests received after this date will be taken on a space available basis at current room rates.

Accommodations: Please indicate your 1st and 2nd lodging preference below. If room type requested is not available, the next available room type and rate will be confirmed. We cannot guarantee specific rooms/units. All rooms are non-smoking.

ACCOMMODATIONS - Check In at 5pm and Check Out at 11am in all units					
ROOM TYPE	SUNDAY RATE SINGLE	SUNDAY RATE DOUBLE	MONDAY- THURSDAY SINGLE	MONDAY- THURSDAY DOUBLE	INDICATE 1 ST & 2 ND CHOICE
HEATHER HIGHLANDS INN					
Inverness Standard – 2 Queen beds	\$261.56	\$144.75	\$171.87	\$99.90	
Inverness Deluxe – King Murphy Bed & kitchen	\$261.56	\$144.75	\$171.87	\$99.90	
Inverness Loft – King in loft, queen murphy bed & kitchen	\$334.52	\$181.23	\$209.61	\$118.78	
Pleasantview Suite – Queen bed, queen murphy & kitchen	\$322.36	\$175.15	\$221.16	\$124.55	
Pleasantview Loft – Queen bed, queen and twin in loft, kitchen & two bathrooms	\$358.84	\$193.39	\$247.09	\$137.51	

Rates are based on the Breakfast Package Plan, which includes lodging and breakfast the following morning. All rates are per person, per night, and include state and local taxes, resort fees and meal gratuities.

Package rates per night for additional guests will be \$27.94 per adult (ages 16 and up) and \$16.51 for juniors (ages 6-15).

The Highlands Resort has a two-night minimum on weekends (Friday and Saturday night).

Reservations can be made by calling, on-line, mail or fax Booking Code 13Z8GW

BOYNE Central Reservations 3600 Village Harbor Drive Bay Harbor, MI 49770

Phone: 231.462.6963 Fax: 231.459.3591

E-Mail: centres@boyne.com

Deposits: A \$100 per person deposit is required and is refundable with cancellations received no later than December 16th, 2022. Please reserve prior to December 16th 2022 as reservations are accepted on a first-come first-served basis.

Cancellation Policy: Cancellation and changes affecting arrival/departure dates must be made 7 days prior to arrival date in order to receive refund of deposit, less a \$10.00 administrative fee.

Tax exempt individuals: Please present the state tax exempt form 3372 at check in. NOTE: Personal funds are not exempt from state tax or local assessments.

CONFERENCE REGISTRATION FEE \$250

(Register at tristatedentalmedical.com.)

PLEASE PRINT

ARRIVAL DAY/DATE:	
DEPARTURE DAY/DATE:	
NUMBER OF ADULTS IN PARTY:	
NUMBER OF CHILDREN IN PARTY:	
AGES OF CHILDREN 18 & UNDER:	
NAME:	
ADDRESS:	
CITY:	STATE: ZIP:
PHONE:	
*E-MAIL ADDRESS:	
BOYNE REWARDS #:	
**SPECIAL REQUESTS :	
**BOYNE does its best to acco	ommodate requests, but cannot guarantee them.
PAY	MENT METHOD
CHECK ENCLOSED \$	
American Express	Visa MasterCard Discover
CREDIT CARD #	Expiration Date
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SIGNATURF:	Security Code