

GRAND CHAPTER
ORDER OF THE EASTERN STAR
STATE OF LOUISIANA
"ECHOES OF THE CENTURIES"

HOTEL RESERVATION REQUEST
LOUISIANA MEMBERS

NAME _____ TITLE _____ NO. IN PARTY _____

ADDRESS _____

P.O. BOX _____ CITY _____ STATE _____ ZIP _____
PHONE NO. (HOME) _____ BUSINESS OR CELL _____

ARRIVAL DATE ____ / ____ / ____ DEPARTURE ____ / ____ / ____

NAME OF OTHERS IN PARTY _____ TITLE _____

LOUISIANA MEMBERS WILL BE HOUSED IN THE BAYMONT INN & SUITES

KING _____ \$89.00 DOUBLE (2 BEDS) _____ \$89.00

SMOKING _____ NON SMOKING _____ HANDCAPPED YES _____ NO _____

CHECK IN TIME: 3:00 P.M. CHECK OUT TIME: 11:00 P.M.
RESERVATIONS MUST BE GUARANTEED BY CREDIT CARD OR PERSONAL
CHECK.

NAME OF CREDIT CARD _____ CARD NUMBER _____
EXP. DATE ____ / ____ / ____

ALL RESERVATIONS MUST BE MADE THROUGH THE HOUSING CHAIRMAN.
THE HOTEL HAS BEEN INSTRUCTED AND WILL ACCEPT RESERVATION
REQUEST ONLY THROUGH THE HOUSING CHAIRMAN. PLEASE MAKE
CHECK PAYABLE TO HOTEL.

MAIL RESERVATION REQUEST TO:

TEENA SATCHER, HOUSING CHAIRMAN
29 HWY 457
LECOMPTE, LA. 71346

IF YOU HAVE ANY QUESTION CONCERNING HOUSING, CONTACT ME AT
318-776-5157 OR E-MAIL ME AT: EDANDTS@AOL.COM

MAKE RESERVATIONS BEFORE MARCH 9TH 2010