



**Lions Clubs International
5M1 Mid-Winter Convention
January 29, 30, and 31, 2010
Holiday Inn, Austin, Minnesota**



Please make your own hotel reservations.

Call the Austin Holiday Inn, 507-433-1000

Ask for the Lions convention rate: Standard room, \$86.99+tax; poolside/poolview, \$96.99+tax;
Suites, \$106.99+tax; 2 room suites, \$116.99+tax

Austin Days Inn: Standard room, \$62.99+tax; Suites, \$72.99+tax

Rooms must be reserved before January 4, 2010, or they will be released to the public.

Please fill out one registration form for each family.

Name _____ Lion/Lioness/Guest (circle one) _____ Club _____

Name _____ Lion/Lioness/Guest (circle one) _____ Club _____

Address: _____ City: _____ State: _____ Zip: _____

Phone _____ E-mail: _____

Check if this is your first mid-winter.

Check if this is your spouse/guest's first mid-winter.

Registration Options

Purchased BEFORE January 17, 2010			
Meal costs include all taxes & gratuity.			
Item **	Number	Cost	Total
Hospitality Book (all meals EXCEPT Honors Breakfast)		\$50.00	
Hospitality Book First time attendee (What a Deal!)		\$45.00	
Honors Breakfast (Melvin Jones/Helen Keller/Hearing Research Award Recipients only) 2009 recipients FREE!	#Paid _____ # Free _____	\$10.00 0.00	
Saturday Luncheon		\$12.00	
Saturday Banquet* (Fill in meal choice below)		\$28.00	
Sunday Brunch		\$15.00	
Registration received AFTER January 18, 2009, including walk-ins			
Item **	Number	Cost	Total
Hospitality Book (all meals EXCEPT Honors Breakfast)		\$60.00	
Hospitality Book First time attendee (What a Deal!)		\$55.00	
Honors Breakfast (Melvin Jones/Helen Keller/Hearing Research Award Recipients only) 2009 recipients FREE!	# Paid _____ # Free _____	\$10.00 0.00	
Saturday Luncheon		\$15.00	
Saturday Banquet (Fill in meal choice below.)		\$35.00	
Sunday Brunch		\$15.00	

Registrant: Prime Rib Walleye Vegetarian --- Spouse/Guest: Prime Rib Walleye Vegetarian

Please specify any OTHER dietary needs _____

(Clubs can send one check for all members provided that a SEPARATE FORM is filled out for EACH member.) Cash

Check Number _____ Total Submitted \$ _____

**Make checks payable to
District 5M1.**

**Mail Registrations to:
VDG1 Randi Fravert
340 9th Street NW
Plainview, MN 55964**