

## Maryland Correctional Administrators Association

### 42<sup>nd</sup> Annual Conference Registration Form

|                 |  |
|-----------------|--|
| Member Name:    |  |
| Agency Name:    |  |
| Agency Address: |  |
| Telephone:      |  |
| Fax:            |  |
| E-Mail:         |  |

Please Put "✓" in the Appropriate Box

| Registration  | Member  | Non-Member  |  |
|---|---|---|--|
| Full Registration<br><i>Before May 15<sup>th</sup></i>      | \$195<br><small>Includes Ticket for Awards Banquet on Sunday,<br/>President's Reception on Sunday, Ticket for<br/>Feast Buffet on<br/>Monday and all Workshops.</small> | \$215<br><small>Includes Ticket for Awards Banquet on Sunday,<br/>President's Reception on Sunday, Ticket for<br/>Feast Buffet on Monday and all Workshops.</small> |  |
| Full Registration<br><i>After May 15<sup>th</sup></i>       | \$240   | \$260   |  |
| One Day<br>Registration                                     | \$110<br><small>Includes Ticket for Feast Buffet on Monday<br/>and all Workshops.</small>   | \$135<br><small>Includes Ticket for Feast Buffet on Monday<br/>and all Workshops.</small>   |  |
| One Day<br>Registration<br><i>After May 15<sup>th</sup></i> | \$125<br><small>Includes Ticket for Feast Buffet on Monday<br/>and all Workshops.</small>   | \$150<br><small>Includes Ticket for Feast Buffet on Monday<br/>and all Workshops.</small>   |  |

| Additional Tickets/Guest Fees | Cost Per Ticket<br>Before May 15 <sup>th</sup> | Cost Per Ticket<br>After May 15 <sup>th</sup> | Number Needed |
|-------------------------------|--|---|---------------|
| Awards Banquet                | \$42.00  | \$55.00                                       |               |
| Feast Buffet                  | \$42.00  | \$55.00                                       |               |
| Child's Meal Banquet          | \$12.50  | \$15.00                                       |               |
| Child's Meal Feast Buffet     | \$12.50  | \$15.00                                       |               |

|  |  |
|--|--|
| Total Registration Fee(s):             |  |
| Total Guest Fees / Additional Tickets: |  |
| <b>TOTAL ENCLOSED:</b>                 |  |

**Please submit this registration form and your, credit card authorization, check or money order (no cash) made payable to "MCAA" to:**

MCAA  
 c/o Mary Ann Thompson  
 St. Mary's County Detention Center  
 P. O. Box 960  
 Leonardtown, MD 20650

Questions may be emailed to  
[maryann.thompson@stmarysmd.com](mailto:maryann.thompson@stmarysmd.com)

Looking forward to seeing you at the  
 42<sup>nd</sup> Annual MCAA Conference!!!!

**Maryland Correctional Administrators Association**

**Checks made payable to:**

MCAA  
c/o Mary Ann Thompson  
Post Office Box 960  
Leonardtown, MD 20650

**Credit Card Billing:**

**Purpose:** \_\_\_\_\_

\_\_\_\_ AMEX \_\_\_\_ Discover \_\_\_\_ MasterCard \_\_\_\_ Visa

**Amount:** \$ \_\_\_\_\_

**Card #** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **CV#** \_\_\_\_\_

**Name of Card Holder:** \_\_\_\_\_

**Signature of Card Holder** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

\_\_\_\_\_



**Fontainebleau Hotel**

10100 Coastal Highway  
Ocean City, MD 21842  
800-638-2100 / 410-524-3535  
Fax 410-524-3834  
www.clarionoc.com

**RESERVATION FORM**  
Please Print All Information

**MCAA**  
June 2, 2017- June 6, 2017

ARRIVAL DATE: \_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_

**CHECK ROOM TYPE REQUESTED:**

- DOUBLE/DOUBLE **\$165.00**
- EXECUTIVE KING **\$185.00**
- STUDIO KING **\$195.00**
- CABANA **\$215.00**
- 1 BEDROOM CONDO **\$195.00**
- 2 BEDROOM CONDO **\$255.00**
- 3 BEDROOM CONDO **\$315.00**

# in Party:      Adults \_\_\_\_\_      Children \_\_\_\_\_

Hotel room rates are per room per night, based on single or double occupancy. There is a charge of \$15.00 per night for each additional adult per room. Children 17 & under stay free in their parent's room using existing bedding. Condominium Rates Do Not Include Daily Maid Service.

**All Rooms Are Non-Smoking**

**\*\*ROOM TYPES BASED UPON AVAILABILITY\*\***  
(Rates Are Subject to 10.5% Tax)

NAME \_\_\_\_\_ SHARING WITH: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_ TELEPHONE \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

\*\*SPECIAL REQUESTS \_\_\_\_\_

**RESERVATIONS RECEIVED AFTER MAY 5, 2017  
WILL BE ON A SPACE AND RATE AVAILABILITY BASIS**

**ADVANCE DEPOSIT**

A one-night deposit is required to guarantee reservations at the Clarion Resort Fontainebleau Hotel.  
*Credit cards will be charged for one night, plus tax, upon reservation request.*

A) Enclosed is a check or money order for \$ \_\_\_\_\_

**OR**

B) Please charge my credit card account in the amount of \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration \_\_\_\_\_

Print name as it appears on credit card \_\_\_\_\_

Signature \_\_\_\_\_

**NOTE: ONLY MAJOR CREDIT CARDS OR CASH ARE ACCEPTED AT CHECK-IN FOR  
SETTLEMENT OF ACCOUNT**

**CHECK-IN 4:00 PM/ CHECK-OUT 11:00 AM**

**\*\*\*NO REFUNDS FOR EARLY DEPARTURES\*\*\***

**72 HOUR NOTICE PRIOR TO SCHEDULED ARRIVAL REQUIRED FOR CANCELLATION  
OR REDUCTION IN LENGTH OF STAY**

For further information, please contact our Reservations Department at 800-638-2100 or reservations@clarionoc.com