

SDSA CONVENTION BID FORM FOR YEAR _____

Club _____	Proposed
Facility _____	
Contact Person _____	Contact Person _____
Address _____	Address _____
City _____	City _____
Phone _____	Phone _____

Total Number of Facility Rooms _____ Number of Room Blocked _____

Room Rate (including tax)

1 person _____ 2 persons _____ 3 persons _____ 4 persons _____

Kids under age _____ stay FREE in parents room

Meals - Adults	Cost	Menu
Saturday Breakfast	_____	_____
Saturday Luncheon	_____	_____
Saturday Banquet	_____	_____
Dance Only	_____	_____

Meals- Youths

PLAN A	Cost	Food	PLAN B	Cost	Food
Sat. Bkfst.	_____	_____		_____	_____
Sat. Lunch	_____	_____		_____	_____
Sat. Supper	_____	_____	Banquet	_____	_____

Registration Fees Deadline Date for Receiving Discount Rate _____

Individual Package	Pre Deadline	\$ _____	After Deadline	\$ _____
Couple Package	Pre Deadline	\$ _____	After Deadline	\$ _____
Youth Plan A	Pre Deadline	\$ _____	After Deadline	\$ _____
Youth Plan B	Pre Deadline	\$ _____	After Deadline	\$ _____

Meeting Rooms	Size	Seating Capacity
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Banquet	_____	_____
Annual Meeting	_____	_____
Presidents Meeting	_____	_____
S/M of Year Judging	_____	_____
Workshops	_____	_____
Board Meetings	_____	_____
Auction/BeerNBull	_____	_____

Dealer Display Area _____ sq. ft. of floor space

Please attach a map of the convention facility meeting spaces.