NATIONAL C REVISED COPY - DATES		ION RESERVATION FORM GUST 22-28, 2025 HOTEL TAMPA RIVERWALK, FLORIDA	
ALL ROOMS MUST BE RESERVED THROUGH DEPARTMENT HEADQUARTERS!			
FORM WILL BE RETURNED IF ANY REQUIRED INFORMATION IS MISSING! NAMEADDRESS			
CITY/STATE/ZIP			
		POSTDISTRICT	
HOTEL INFORMATION All rooms are located in the HOTEL TAMPA RIVERWALK. Rates quoted include 13.5% tax PLUS \$1.70 per room/night. A check for a one night deposit or credit card <i>MUST ACCOMPANY THIS FORM</i> in order to guarantee your reservation.			
ARRIVAL DATE DEPARTURE DATE	NO. 0	DF PEOPLE IN ROOM	
PLEASE CHECK ONE: KING (1-2 people) \$148.12 DOUBLE (1-2 people) \$148.12 ADDITIONAL OCCUPANTS (after two) IN ROOM \$20 PER PERSON /DAY (NOTE: NO SMOKING IN THE HOTEL VIOLATORS WILL BE FINED) DO YOU REQUIRE A HANDICAP ACCESSIBLE ROOM? YESNO NAME(S) OF OTHER(S) SHARING ROOM			
EMAIL ADDRESS (REQUIRED) PAYMENT INFORMATION* – MUST MARK ONE *ONLY HOTEL ROOMS MAY BE GUARANTEED BY CREDIT CARD. Check enclosed (payable to: PA American Legion) for a one-night deposit in the amount of \$148.12. Guarantee by credit card Visa MasterCard Amex Other Card No.			
NATIONAL COMMANDER'S BANQUET BANQUET TICKETS MUST BE PAID FOR BY CHECK		REGISTRATION FEE <u>REGISTRATION FEES MUST BE PAID FOR BY CHECK</u> Delegate / Alt \$35 each =	
Legionnaire \$45 each = Legionnaire's \$45 each = Spouse		Guest \$35 each = SAL \$35 each = TOTAL = Check ONLY YOU MUST BE REGISTERED AS ONE OF THE ABOVE IN ORDER TO GET INTO CONVENTION HALL AND EXHIBITS. THIS	
Other \$70 each = TOTAL = <u>Check ONLY</u>			
PLEASE COMPLETE THIS FORM IN FULL AND 1 WITH PAYMENT (checks payable to PA American Le	-	IS NATIONAL'S RULE!	
THE AMERICAN LEGION ATTN: NATIONAL CONVENTION REGISTRATON PO Box 2324, Harrisburg, PA 17105 (717) 730-9100 FAX: (717) 975-2836	AMOUNT YOU OWE - CHECK PAYMENTS ONLY		
DEADLINE FOR RESERVATIONS: JULY	7, 2025	HOTEL ROOM (only if paying by check) \$ REGISTRATION FEE(S) \$	
Parking Rate per Day: \$20.00 - Vale **EMERGENCY CONTACT AND PHONE**:	et Only	NAT'L COMMANDER BANQUET \$ FINAL TOTAL DUE \$	