

New Hampshire Tax Collectors Association Annual Meeting, September 19-22, 2023

Reservation Deadline: Friday, August 30, 2023

Mail to: North Conway Grand Hotel, 72 Common Court, North Conway, NH 03860

Phone: (603) 356-9300 or (800) 648-4397; Fax: (603) 356-6028

Package Per Person Rates

Per Person Tax Exempt Package Pricing:

Wednesday-Friday (2 Nights)	Single Occupancy \$499 Triple Occupancy \$336	Double Occupancy \$374 Quad Occupancy \$316
Wed-Thu. or Thu-Fri. (1 Night)	Single Occupancy \$298 Triple Occupancy \$215	Double Occupancy \$231 Quad Occupancy \$207

Per Person Tax Included Package Pricing:

Wednesday-Friday (2 Nights)	Single Occupancy \$542 Triple Occupancy \$365	Double Occupancy \$407 Quad Occupancy \$344
Wed-Thu. or Thu-Fri. (1 Night)	Single Occupancy \$318 Triple Occupancy \$229	Double Occupancy \$250 Quad Occupancy \$219

Two Nights Package: Two nights hotel accommodations, Two Hot Breakfast Restaurant Buffet (Thursday & Friday), Deluxe Continental Breakfast (Wednesday), Two Lunch Buffets (Wednesday/Thursday), Two Buffet Dinners (Wednesday & Thursday), One afternoon coffee break (Tuesday), Audio/Visual Equipment (In-House) and all applicable gratuities are included and taxes when applicable.

One Night Only Package: One night hotel accommodations, Hot Breakfast Restaurant Buffet (Thursday or Friday), Two Lunch Buffets (Wednesday/Thursday), One Dinner Buffet (Wednesday or Thursday), One afternoon coffee break (Tuesday), Audio/Visual Equipment (In-House) and all applicable gratuities are included and taxes when applicable.

Tuesday: Room only option is available at \$119.00 plus 8.5% tax.

Name: (1	please print)	If you are sharing a	room, please <u>ONLY submit</u>	
				ty:
Zip:	Phone:	Email:		
	Arrival Date		· ·	tel confirmation – only one address if sharing
	Single Occupancy:	Double Occupancy:	Triple Occupancy:	Quad Occupancy:
To conf	to be process		form. Make checks payable to	accepted by check, money order, or major credit card to: North Conway Grand Hotel.
Credit (Card #:		Expiration Date:	
Name or	n Card:			
If more	than one card will be cha	rged: (i.e., for double occupa	ncy):	
Credit Card #:		Expiration Date:		
Name or	n Card:			
		ng mailed, please include a cop exing, please include a copy of		th the check(s) so the payment can be applied to your on form.
Check E	nclosed: Amou	ınt:		
billed at	full package rate and no re	efund for any package items n	ot consumed/used. Please no	cancel 7 days prior to arrival. Early departures will be ote that a valid credit card is required at check-in, at check-in. No Cash Accepted.

Please Note: Confirmation of this reservation will be sent with a legible email address. If you have any questions, contact the hotel directly. **We are not able to guarantee/honor all special requests**. Check-in after 4:00 PM; Checkout prior to 11:00 AM.