



63RD ANNUAL ACD EASTERN SPRING MEET

"Explore Northeast Ohio"
 May 25th – 29th, 2017

NAME		SPOUSE/GUEST/ PARTNER	
MAILING ADDRESS		CELL PHONE	
CITY, STATE, ZIP		EMAIL ADDRESS	

Car Registration: Make _____ Year _____ [] Display Only
 Body Style _____ [] Judged (\$50)
 Car Insurance Company _____ Policy Number _____

Car information is turned in and becomes the property of the ACD Club.

Meet Registration Information

Adults _____ @ \$150 each* (\$300/couple) \$ _____
 Children under 6 are free _____ @ \$ 0 \$ _____
 Car Registration for Judging _____ @ \$ 50 each \$ _____
 Total amount enclosed \$ _____

Make check payable to: Holly A. Olszewski

Mail to: Holly Olszewski, 7471 Wisdom Lane, Dublin, OH 43016

100% of Meet Registration is due by April 24, 2017

ACD MEET HOTEL – INCLUDING HOSPITALITY ROOM

NOTE: Hotel Arrangements must be made by May 3, 2017 and paid for INDIVIDUALLY, ON YOUR OWN

Homewood Suites by Hilton® Cleveland-Solon 6085 Enterprise Parkway Solon, Ohio 44139	Queen Studio Suite - \$99.00 plus tax King One Bedroom Suite - \$104.00 plus tax Two Queen One Bedroom Suite - \$129.00 plus tax <i>(only 5 available)</i> Tax is 16.5%
<u>For reservations:</u> Call Homewood Suites Solon at 440-519-9500 & ask for the ACD Club Group Rate or make <u>on-line</u> Check-in 3PM, Check-out 11AM	<ul style="list-style-type: none"> • All rooms have a separate vanity area, living area with pull-out sofa bed and HDTV, and full kitchen. • The Queen Studio Suites have a shower. • The One Bedroom Suites have 2 HDTVs and a tub. This hotel is non-smoking and is not pet friendly.
Hotel rate includes Wi-Fi, hot breakfast buffet, Thursday evening complimentary dinner reception form 5-7pm with beer and wine. This hotel has an Indoor pool, fitness center, had a full property renovation in completed in January 2016.	

RELEASE FROM LIABILITY: The undersigned desiring to participate in the ACD Club Eastern Spring Meet on behalf of himself/herself, his/her family and guests, does hereby agree to hold the sponsoring group, and any affiliated person or persons acting on its behalf, harmless from all claims or liability occurring in connection with this event. I accept the above terms and conditions.

Signed _____ Date _____

*The registration fee includes: hospitality suite (beer, wine soft drinks, light snacks), museum admissions, Friday, Saturday, and Sunday lunch, Sunday dinner banquet, dash plaque, & ACD gift. Dinners on Thursday, Friday, and Saturday are on your own.

For questions contact: Holly Olszewski

Cell: 281.788.4198

Email: holly.olszewski@gmail.com