

**2014 CONNECTICUT COUNCIL OF DELIBERATION
AND A WEEKEND WITH THE LADIES**
PRESENTED BY
THE CONNECTICUT VALLEYS
OF THE
ANCIENT ACCEPTED SCOTTISH RITE



MYSTIC HILTON HOTEL
FRIDAY SEPTEMBER 26TH – SUNDAY SEPTEMBER 28TH

**HOTEL ROOMS
AT A
SPECIAL EVENT RATE
OF
\$ 139.00 PER NIGHT
PER PERSON**

**ALL INCLUSIVE MEAL
PACKAGE FOR
\$ 50.00 PER PERSON
(FRIDAY RECEPTION, ALL
SATURDAY MEALS AND SUNDAY
BREAKFAST)**

FEATURING:

FULL PROGRAMS FOR THE LADIES DURING COD MEETING TIMES!
MENS ATTIRE FOR THE COD MEETING IS COAT AND TIE WITH OFFICE JEWELS (NO CAPS)

GET MOTIVATED DURING AN AFTERNOON WITH BOB TALLON!

AN EVENING OF FINE DINING AND DANCING FEATURING D.J. MARTY Q!
SUIT AND TIE FOR THE MEN AND APPROPRIATE ATTIRE FOR THE LADIES PLEASE!

AMPLE TIME TO ENJOY THE SITES AND SOUNDS OF HISTORIC MYSTIC!

HOTEL ROOMS MUST BE BOOKED **DIRECTLY** WITH MYSTIC HILTON HOTEL BY **AUGUST 18TH** FOR THE SPECIAL EVENT RATE TO APPLY, CALL 860-572-0731 AND MENTION: **CONNECTICUT COUNCIL OF DELIBERATION**. CHECK IN TIME IS 3:00 P.M. CHECK OUT TIME IS 12:00 NOON.

HOTEL RESERVATIONS MAY BE CANCELED UP TO 72 HOURS IN ADVANCE OF EVENT WITHOUT PAYMENT PENALTY. RESERVATIONS CANCELED LESS THAN 72 HOURS WILL BE CHARGED 1 NIGHTS ACCOMMODATIONS.

FRIDAY

5 -7 P.M.

REGISTRATION AND WELCOME RECEPTION
CASH BAR WITH HORS D'OEUVRES
CASUAL ATTIRE

SATURDAY

REGISTRATION 8:00 - 9:00

MORNING

BREAKFAST 7:30 - 9:00 (MEN AND LADIES)

COD MEETING AND LADIES ACTIVITY 9:00 - 11:30

LUNCHEON 12:00 - 1:30 (MEN AND LADIES)

AFTERNOON: LADIES ARE WELCOME!

AN AFTERNOON WITH BOB TALLON 1:30 - 3:30

LEARNING CENTER PRESENTATION 3:30 - 4:00

EVENING WITH THE LADIES!

COCKTAIL RECEPTION 5:30 - 7:00

OPEN BAR WITH HOT HORS D'OEUVRES

DINNER/DANCING 6:30 - 11:00

FEATURING D.J. MARTY Q

MSA AWARD CEREMONY DURING THE DINNER

SUNDAY

BREAKFAST AT YOUR CONVENIENCE (COUPON PROVIDED)

DEPARTURE ON YOUR OWN SCHEDULE

CHECK OUT TIME IS 12:00 NOON.

MEAL RESERVATIONS MUST BE RETURNED NO LATER THAN **AUGUST 27TH**.

PACKAGE MEAL PRICE IS **\$ 50.00 PER PERSON.**

ENCLOSED IS MY CHECK IN THE AMOUNT OF \$ _____

CHECKS SHOULD BE MADE PAYABLE TO "CT COUNCIL OF DELIBERATION"

NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

PLEASE MAIL YOUR CHECK ALONG WITH THIS REGISTRATION FORM TO:

**RICHARD R. JONES, JR.
1 GRANBY FARMS ROAD
GRANBY, CT. 06035**