Daughters of the King, Province IV
Annual Fall Assembly, October 6-10, 2008
Kanuga Conference Center, Hendersonville, NC
The Assembly begins with supper on Mon, Oct 6th and ends after breakfast on Fri. Oct 10th
Deadline for registration is September 21, 2008.

NAME; (as you wish it to appear on name tag)

_____

Address:_____

City:_____State_____Zip:_____

DOK Chapter_____Parish_____Diocese_____

Phone( )_____Email:_____(

Special Request:_____
(handicapped room, dietary; special room equipment(ie raised toilet seat, shower/tub bars)

Roommate_____

Circle Housing Preference: Inn Cottage Guest House (Smoking ONLY outside)

Circle all applicable: Deacon, Priest, Chaplain, Bishop, Sr. Daughter, Delegate, 1st Timer, Visitor

Kanuga Overnight Rates for DOK (includes lodging & meals). Rates are all inclusive Smoking OUTSIDE only

Dates of Stay	Rate/ person Double	**Rate / person Single**	Commuters rate	
Sun10/5 (S)-Fri, 10/10 (L)	$425.00	$580.00	Breakfast--$9.25	
Sun10/5 (S)-Fri. 10/10 (B)	$415.60	$570.60	Lunch--$10.40	
Mon10/6 (L)-Fri. 10/10 (B)	$340.00	$464.00	Supper--$13.50	
Mo 10/6 (S)-Fri. 10/10 (B)	$330.60	$454.60		
Mon10/6 (L)-Thu. 10/9(S)	$276.90	$369.90		
Mon 10/6(S)-Thu10/9(L).	$255.00	$348.00		

Please circle your preference on the above chart.
Commuters;please circle the meals you will be eating

Communters please circle the day you will be attending. Mon Tue Wed Thurs

Single occupancy availability will not be determined until Sept 21, 2008. Requests will be honored in order of receipt.

Full Payment is due to Kanuga on Arrival (Payable by cash, check, Visa or Mastercard)
It is important that you register in advance as Kanuga cannot guarantee meals & housing will be available without a registration.
PLEASE NOTE: there will be a $15.00 fee per person per night charged by Kanuga without a 24 hr notice of cancellation, includes commuters. For cancellations after October 4, please call Kanuga @ 828-692-9136.

Commuters w/o meals are required to PAY Kanuga a $3.00 per day fee

Arrival Date& First Meal_____

Departure Date & Last Meal_____

A non-refundable registration fee of $30.00 payable to DOK, Province IV, is required with this form.
Mail this form with DOK registration fee TO:
Margaret Kidd
161 LONG LAKE RD,
HAWTHORNE, FL 32640
PHONE/FAX 352-475-1708
EMAIL: paulkidd1@alltel.net

Please make a copy for yourself