

Please send the following coupon to:

Electric Railroaders' Association, Inc.
P.O.Box 3323
New York, NY 10163-3323

or call: 212-986-4482



Please enclose a stamped, self-addressed envelope with this coupon and make check or money order payable to the ERA. Thank you.

Ticket Order Form

Electric Railroaders' Association 2003 Convention

Yes, I plan to attend the ERA's 2003 convention in Toronto.

Please send me tickets for the following events (all prices are in US dollars):

TTC Streetcar Trip, Saturday, August 30	_____ (QTY) @ \$27 each:	\$ _____ (TOTAL)
Halton County Radial Railway Museum, Sunday, August 31	_____ (QTY) @ \$30 each:	\$ _____ (TOTAL)
Banquet*, Sunday, August 31	_____ (QTY) @ \$27 each:	\$ _____ (TOTAL)
TTC Half-Day Streetcar Trip, Monday, September 1	_____ (QTY) @ \$21 each:	\$ _____ (TOTAL)

—OR—

Full Convention Package (all of the above) _____ (QTY) @ \$93 each: \$ _____ (TOTAL)

*Turkey will be served. Check here if you want to substitute Fish or Vegetarian.

I **will** be staying at the Days Hotel I **will not** be staying at the Days Hotel

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

BUSINESS PHONE: _____ HOME PHONE: _____

Please send the following coupon to:

Days Hotel & Conference Centre
30 Carlton St.
Toronto, ON
M5B 2E9CANADA

or call: 416-977-6655



Your reservation must be received no later than July 29, 2003.
If you call make sure you indicate your reservation is for the ERA Convention.

Deposit Requirements

To guarantee your reservation you must send a one-night's deposit. If you are not using a credit card, please enclose a check or money order payable to the DAYS HOTEL & CONFERENCE CENTRE with this coupon.

Cancellations

Cancellations must be received 72 hours prior to arrival for refund. Your cancellation number should be kept for reference.

Hotel Reservation Request

Electric Railroaders' Association 2003 Convention

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

BUSINESS PHONE: _____ HOME PHONE: _____

Room Type:

- Single (1 person)
- Twin (2 people, 2 beds)

ARRIVAL DATE: _____

ESTIMATED ARRIVAL TIME: _____

DEPARTURE DATE: _____

NAME OF PERSON SHARING ROOM (IF APPLICABLE) _____

AMOUNT ENCLOSED: _____ (ALL ROOMS ARE CANADIAN \$139.00 PLUS TAX)

Credit Card Guarantee

- VISA
- MasterCard
- American Express
- Discover
- Diners Club

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

SIGNATURE: _____