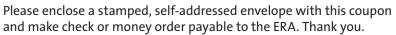Please send the following coupon to:

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 2004 convention in San Francisco.
    Please send me tickets for the following events (all prices are in US dollars):

Sat 9/4: San Jose Light Rail & Kelley Park Streetcars	_____ (QTY) @ $59 each:	$_____
Sun 9/5: All-Day Municipal Railway streetcar fantrip	_____ (QTY) @ $38 each:	$_____
Sun 9/5: Banquet*	_____ (QTY) @ $38 each:	$_____
Mon 9/6: Rio Vista Trolley Museum	_____ (QTY) @ $35 each:	$_____

—OR—

Full Convention Package (all of the above)   **_____ (QTY) @ $153 each:**   **$_____**

—PLUS—

Tue 9/7: Sacramento & Siemens   _____ (QTY) @ $43 each: $_____

Total Enclosed: $_____

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

I ☐ will   ☐ will not   be staying at the Canterbury Hotel

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE:_____ ZIP CODE: _____

BUSINESS PHONE: _____ HOME PHONE: _____

Please send the following coupon to:

Best Western Canterbury Hotel
750 Sutter Street
San Francisco, Calif. 94109, or

call 1-800-227-4788.

Your reservation must be received no later than August 5.
If you call the Canterbury Hotel, make sure that you indicate that
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 BEST WESTERN CANTERBURY HOTEL 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 2004 Convention

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE:_____ ZIP CODE: _____

BUSINESS PHONE: _____ HOME PHONE: _____

Room Type:

☐ Single (1 person) $99 per night
☐ Twin (2 people, 2 beds) $99 per night
☐ Triple (3 people) $114 per night

ARRIVAL DATE:_____

ESTIMATED ARRIVAL TIME: _____

DEPARTURE DATE: _____

NAME OF PERSON SHARING ROOM (IF APPLICABLE): _____

AMOUNT ENCLOSED:_____

Credit Card Guarantee

☐ VISA   ☐ MasterCard   ☐ American Express   ☐ Discover   ☐ Diners Club

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

SIGNATURE: _____