

DATE: March 15, 2025

TO: Members of the Missouri Elks Association

FROM: Brian & Betsy Crawford
MO Elks Convention Committee
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Jefferson City, MO 65109
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Reservations are now open for our 2025 Grand Lodge Convention which will be held in Kansas City, Missouri, June 29 – July 2, 2025. Our Missouri delegates will be housed at the Hotel Phillips, Curio Collection Hilton Kansas City, 106 W 12th Street, Kansas City, MO, 64105. Daily room rate is \$139 per night plus \$27.28 tax for a total of \$166.28 per night. This rate shall also apply for those who wish to stay 3 days before and after the convention. **Credit card payments only, no personal checks will be accepted.** Hotel has valet parking at **\$42** per day. Check-in time is 4PM and check-out is 11AM. **All MO Elk hotel reservations must be made through us.**

For those needing the use of a wheelchair or motorized scooter, please let us know so we can pass onto Grand Lodge who will assist in making appropriate transportation and wheelchair availability arrangements.

Exalted Rulers, please see that this reservation form is brought to the attention of your members as no additional forms will be sent to the individual Lodges. Please make copies as needed for posting or perhaps post in your monthly newsletter.

The reservation form below must be returned to us via USPS or email (addresses are listed above) along with credit card information for the one-night room deposit of \$166.28 no later than May 15, 2025. If you have any questions, please contact us at the email address above or by phone 573-821-0468 (Brian) or 573-821-0467 (Betsy). Thank you and see you in Kansas City.

Online pre-registration for the Grand Lodge Session opens April 1 and will be available at elks.org/convention/prereg.cfm through June 26. See the April Grand Lodge Newsletter for more information.

RESERVATION FORM
PLEASE PRINT OR TYPE

NAME _____

ADDRESS _____ CITY _____ ZIP _____

PHONE _____ EMAIL _____

LODGE NAME and NUMBER _____

ARRIVAL DATE _____ DEPARTURE DATE _____

NUMBER OF PEOPLE _____ SINGLE ROOM _____ DOUBLE ROOM _____

WHEELCHAIR/MOTORIZED SCOOTER _____

CREDIT CARD PAYMENT ONLY
PLEASE FILL IN THE FOLLOWING INFORMATION:

NAME ON CREDIT CARD _____

CRDIT CARD NUMBER _____

EXPRIATION DATE _____ CVC # _____

ANY CANCELLATIONS LESS THAN 72 HOURS PRIOR TO ARRIVAL FORFEIT DEPOSIT