



48th Annual Cardiovascular Conference at Snowmass Village · January 14-18, 2017
The Westin Snowmass Resort

Please select the lift ticket option with special pricing available during your stay in Snowmass! Please read the information page for more information regarding your group tickets. **Tickets are ONLY valid from Wednesday, January 11, through Friday, January 20, 2017.** Multiple day tickets do not need to be used in consecutive order. **Tickets must be ordered and paid in full, no later than WEDNESDAY DECEMBER 21, 2016 for special discount pricing.** Orders made after this date will not receiving the 5% discount as noted below.

Adult Tickets (18-64)				
Lift Ticket	Price	Quantity		Total
1 day	\$118			\$
2 day	\$202			\$
3 day	\$303			\$
4 day	\$320			\$
5 day	\$400			\$
6 day	\$480			\$
7 day	\$560			\$

Child (7-12), Teen (13-17) & Senior (65+)					
Please fill out the number of child, teen, and senior tickets required for each ticket type so that SMV Accounting can order the appropriate ticket(s) for you.					
Lift Ticket	Price	Quantity			Total
		Child	Teen	Senior	
1 day	\$89				\$
2 day	\$126				\$
3 day	\$189				\$
4 day	\$236				\$
5 day	\$295				\$
6 day	\$354				\$
7 day	\$413				\$

Children 6 & under ski free (a ticket is provided if enrolled in lessons with Aspen Skiing Company)			
Number of days	Price	Quantity	Total
	\$0		\$0
	\$0		\$0

Subtotal: _____

For orders received by Wednesday December 21, 2016 receive a 5% discount: _____

For deliveries outside of conference room block (see information page), add \$25 delivery charge: _____

Total: _____

Cancellation Policy: Once purchased, ALL TICKETS are NON-REFUNDABLE and cannot be exchanged

PRIMARY ATTENDEE NAME: _____

DAYTIME PHONE NUMBER: _____ CELL PHONE NUMBER: _____

EMAIL ADDRESS: _____

STAYING AT: _____ ARRIVAL DATE & TIME: _____

****please review information page regarding deliveries**

PAYMENT METHOD (check one) ☐ CHECK ☐ VISA ☐ MASTERCARD ☐ AMEX ☐ DISCOVER

****charge will appear as "SMV Accounting"**

CREDIT CARD NUMBER: _____ EXPIRATION DATE: _____ CVV: _____ Zip Code: _____

NAME ON CREDIT CARD (please print): _____

AUTHORIZATION: By signing this form, you are authorizing SMV Accounting to charge the Total Amount Due for activity fees (above) to the Credit Card number provided and confirming that the fees are non-refundable. All Reservations will be confirmed via e-mail or phone. In the event we do not confirm your ticket order, please call or email us to confirm your tickets.

CARDHOLDER SIGNATURE: _____

Please fax or email your complete order to Misty Richardson at phone/fax (970) 710-7975 or email misty@smvaccounting.com.