

MPA PLANNING MEETING

June 10 – 12, 2024

Great Northern Hotel – Helena, Montana

REGISTRATION

- ◆ **Monday, June 10th:** Recreation of Choice; For those that are interested, we have arranged a no-host dinner and boat tour at **GATES OF THE MOUNTAINS**. This dinner will include transportation, as well as a boat tour through the beautiful Gates of the Mountains (www.gatesofthemountains.com) We will depart from the Great Northern Inn at 4:00pm. Please let us know if you would like to attend so we can have an accurate head count. The total cost per person is \$65.00 (*not included in the registration fee*). *Thank you to Browning, Kaleczyc, Berry & Hoven; Crowley Fleck; and ONEOK for sponsoring the charter bus to the Gates of the Mountains!!*



Interested in dinner and boat tour? **Yes** **No**
If so, how many in your party?
Do you have children?

- ◆ **Tuesday, June 11th:** 8:00 a.m. - Planning Meeting, and Working Lunch in the Empire Builder Room at the Great Northern Hotel. Hors d'oeuvres and cocktails in the MPA hospitality suite, room 118, poolside 5:00 p.m. – 6:30 p.m.

Interested in a group dinner? (venue TBD) **Yes** **No**
If so, how many in your party?

- ◆ **Wednesday, June 12th:** 8:00 a.m. - Unfinished Business in the Empire Builder Room
 ▶ *Board of Director's actions will occur as needed throughout the meeting* ◀

To make your room reservations, please call 1-406-457-5500, and tell them you are with the Montana Petroleum room block, or to make your reservation online, click on this link https://www.bestwestern.com/en_US/book/hotel-rooms.27075.html?groupId=W43KL7L7. . Please make your reservations before May 11th to receive the room rate of \$225.00 + tax.

(Continued on other side)

REGISTRATION INFORMATION

*To help defer cost of refreshments & meeting rooms,
there is a registration fee of \$150.00.*

\$ _____

*Dinner and Boat Tour on Monday night at Gates of the Mountains
\$65.00/person (note: if you would rather wait to pay until the event gets closer that is fine)*

\$ _____

TOTAL

\$ _____

Name: _____

Company: _____

Check enclosed

Credit Card

***PLEASE NOTE: DUE TO ESCALATING CREDIT CARD SERVICE FEES, CREDIT CARD PAYMENTS WILL INCUR A
3% SURCHARGE***

Credit Card No. _____ Exp.Date _____

Three Digit CVV Code on the back of the card: _____

Name: _____
(as it appears on card, please print)

Credit Card Billing Address (please include zip code):

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