

**VILLA ROMA RESORT HOTEL**  
**356 VILLA ROMA ROAD**  
**CALICOON, NEW YORK 12723**  
**1-800-727-8455**  
**WELCOMES**  
**THE NATIONAL NYCPD 10-13 ORGS., INC.**  
**37<sup>th</sup> ANNUAL CONVENTION**  
**SUNDAY, August 16<sup>th</sup> - TUESDAY, August 18<sup>th</sup>, 2026**

**Your Rates Include:**

Fine Italian/American Cuisine, served in a private, 10-13 Dining Room-3 meals daily  
Complimentary 10-13 Hospitality Room Sunday-Tuesday  
Hero Sandwiches and Refreshments upon arrival Sunday  
Cocktail Party prior to Monday Dinner  
Dinner with Red & White wines Sunday & Monday Night  
Nightly Entertainment, Theater shows & dancing to DJ in Lounge  
Shuttle to Casino Sunday night  
Door Prizes, 50/50 Raffles  
Golf on Premises-nominal fee, cart included  
Indoor/Outdoor Heated Pools & Jacuzzi  
Spa Facilities offering Massage & Pampering Treatments (fee)  
Gym Area, Tennis, Volleyball, 8 Regulation Bowling Lanes (nominal fee) & Morning/Afternoon  
Movies Fishing & More!  
See Villa Roma Information Summary for all activities.

**RATES & ACCOMMODATIONS**

**WEEKEND PACKAGE RATES ARE PER PERSON, PER NIGHT**

Double Occupancy-Standard Rooms, \$205.73, Single, \$290.59

Double Occupancy-1 Bedroom Suite, \$211.82, Single, \$302.74

\*Children: under 3 yrs.- NO CHARGE, 4-12 - \$101.56 per child, per night

\*Children's Rates only, VALID with One full priced adult in room.

The above rates include 15% Resort Fee, Local NYS Tax & Tips

A \$150.00 deposit, per room is required. Make check payable to:

Villa Roma Resort Hotel

Mail To:

Villa Roma Resort Hotel

356 Villa Roma Road

Calicoon, NY 12723

or

Call 1-800-727-8455 for Reservations

For further information contact: Convention Chairman: John Briganti, 386-871-5941 or  
Co- Chairmen: Sal Pepitone, 516-375-0536; Frank McGrath, 845-629-0932  
Friends & Relatives Welcome

Please fill-out & detach form below and send with your deposit(s)

---

National NYCPD 10-13 Organizations, Inc., August 16th - August 18<sup>th</sup>, 2026

Name(s) \_\_\_\_\_ # of Adults \_\_\_\_\_ Children \_\_\_\_\_

Address \_\_\_\_\_ Phone/Email \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Credit Card Name & # \_\_\_\_\_