

**CARNEGIE HOUSE**  
**2010 PENN STATE FOOTBALL WEEKENDS RESERVATION REQUEST**

- **ALL** reservations are subject to a **TWO-NIGHT MINIMUM** stay for **FRIDAY AND SATURDAY NIGHTS** and must be **prepaid in full**. If you wish to stay more than two nights, please note the dates on the "Special Requests" line below (billed separately).
- **ALL** reservation requests will be processed based on the number of games requested, space-available basis and are subject to our written confirmation.
- **MAXIMUM OF 2 ROOMS PER GAME AND SUBJECT TO AVAILABILITY.**

**All Rates Include Friday & Saturday Night Occupancy, All Applicable Taxes, Based On 2 Adults Per Room**  
**YOUR RESERVATIONS ARE NOT GUARANTEED UNTIL YOU RECEIVE WRITTEN CONFIRMATION**

- 1. Room Types:**
- |   |   |
|---|---|
| <p><b>Double</b> (2 Double Beds) \$857.16<br/>Michigan = \$976.50</p> <p><b>Standard King</b> (1 King Bed) \$857.16<br/>Michigan = \$976.50</p> <p><b>Suite King</b> (1 King Bed - Suite) \$1,030.76<br/>Michigan = \$1193.50</p> | <p><b>Standard Queen</b> (1 Queen Bed) \$857.16<br/>Michigan = \$976.50</p> <p><b>Premium King</b> (1 King Bed - Larger Room) \$900.56<br/>Michigan = \$1030.76</p> |
|---|---|

<u>Game &amp; Dates</u>	<u>Room Type</u>	<u># Adults</u>	<u># Rooms</u>	<u>@</u>	<u>2 Night Rate</u>	<u>Subtotal</u>
Youngstown State 9/3-4	_____	_____	_____	@	_____	\$ _____
Kent State 9/17-18	_____	_____	_____	@	_____	\$ _____
Temple 9/24-25	SOLD OUT					
Illinois 10/8-9	SOLD OUT					
Michigan 10/29-30	SOLD OUT					
Northwestern 11/5-6	_____	_____	_____	@	_____	\$ _____
Michigan State 11/26-27	_____	_____	_____	@	_____	\$ _____

\_\_\_\_\_ Please Add Me To The Wait List If Sold Out **TOTAL:** \$ \_\_\_\_\_

\*\*\* I HAVE READ THE CANCELLATION POLICY: \_\_\_\_\_ (Initial Here).  
**ALL CANCELLATIONS** are subject to a **\$50 PER ROOM CANCELLATION FEE** and must be received in writing **NO LATER THAN THIRTY (30) DAYS PRIOR** to the arrival date. Reservations cancelled thereafter are forfeited and the full deposit is **NON-REFUNDABLE**. In the event of an early departure the remainder of your deposit will be forfeited.

- ♦ RATES ARE NON-COMMISSIONABLE AND DISCOUNT REWARD PROGRAMS DO NOT APPLY DURING SPECIAL EVENTS AND FOOTBALL WEEKENDS.
- ♦ HOTEL RESERVES THE RIGHT TO LIMIT THE NUMBER OF ROOMS RESERVED AND NUMBER OF PERSONS PER ROOM.

SPECIAL NEEDS AND/OR REQUESTS (ADDITIONAL CHARGES MAY APPLY): \_\_\_\_\_

**2. Complete Payment Method**

- \_\_\_\_\_ Please charge my credit card.
- \_\_\_\_\_ Check enclosed.

**3. Return Form To:**

**Carnegie House**  
**100 Cricklewood Drive**  
**State College, PA 16801**  
 PH: (814) 234-2424  
 FX: (814) 231-1299

CREDIT CARD # _____	EXP: ____/____
PRINTED NAME: _____	DAYTIME PHONE: _____
ADDRESS: _____	FAX NUMBER: _____
_____	HOME PHONE: _____
_____	CELL PHONE: _____
_____	EMAIL ADDRESS: _____

SIGNATURE: \_\_\_\_\_ (Required—forms without signatures will be returned).  
 By my signature, I hereby **AGREE** to the terms and conditions specified on this reservation form and agree to the payment and **CANCELLATION POLICY**.