

**DAYS INN - PENN STATE**  
**2012 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 on a first-come-first-served, space-available basis and are subject to our written confirmation.**
- **One parking pass per room.**

**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. Circle Smoking Preference and Room Type. ◊ Smoking ◊ Non-Smoking**

*DD - (2 Double Beds)      EK - (1 King Bed)*

**\*\* NOTE – DUE TO HIGH DEMAND SMOKING PREFERENCE AND ROOM TYPE CANNOT BE GUARANTEED \*\***

<u>Game &amp; Dates</u>	<u>Double</u>	<u>King</u>	<u>Rm Type</u>	<u># Adults</u>	<u># Rooms</u>	<u>@</u>	<u>2 Night Rate</u>	<u>Subtotal</u>
Ohio 8/31-9/1	\$488.26	\$509.96	_____	_____	_____	@	_____	\$ _____
Navy 9/14-9/15	<i>(sold out)</i>							
Temple 9/21-9/22	\$683.56	\$705.26	_____	_____	_____	@	_____	\$ _____
Northwestern 10/5-10/6	<i>(DDNS sold out)</i>							
Ohio State 10/26-10/27	\$792.06	\$813.76	_____	_____	_____	@	_____	\$ _____
Indiana 11/16—11/17	\$553.36	\$575.06	_____	_____	_____	@	_____	\$ _____
Wisconsin 11/23-11/24	\$596.76	\$618.46	_____	_____	_____	@	_____	\$ _____
							<b>TOTAL:</b>	\$ _____

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

\*\*\* 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.**

◆ 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.

**3. Return Form To:**

**Days Inn Penn State**  
**240 S. Pugh Street**  
**State College, PA 16801**  
 PH: (814) 238-8454  
 FX: (814) 237-1607

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.**