



# Comfort Suites Carlisle Dickinson College Graduation 2017



- All reservations must be prepaid in full.
- All reservations are subject to a (2) two night minimum stay for both Friday and Saturday night, or Saturday and Sunday night.
- No refunds will be given in the event of an early departure.
- All reservation requests are processed on a first come, first serve, space available basis and are subject to our written confirmation. No confirmation numbers will be given over the phone.
- Due to high demand, room type requests cannot be guaranteed (except for Jacuzzi Suites).
- Hotel reserves the right to limit the number of persons per room and number of rooms reserved.
- **Cancellation policy;** All cancellations must be received in writing no later than (30) thirty days prior to the arrival date. Reservations cancelled prior to the (30) thirty-day deadline will be subject to a \$50.00 per room Cancellation fee.
- **Cancellations received after the 30 day deadline will result in forfeiture of the reservation as well as the full deposit.**
- Only guests whose name appear on the room reservation may register to the room. Please provide additional guest names(s) in writing no later than 72 hours prior to check-in.

## **Room Types:**

**ND**-Nonsmoking room, 2 double beds

**NK**-Nonsmoking room, 1 king bed

**NK1**-Nonsmoking room, 1 king bed, Jacuzzi (\$299.00 a night) \*Please note additional cost in your total charges.

<u>Date</u>	<u>Room Type Request</u>	<u># of Adults</u>	<u>Rate</u> <u>Nights including tax</u>	<u>#of Rooms</u>	<u>Subtotal</u>
May 19 & 20, 2017 <u>OR</u>	_____	_____	<b>\$523.18</b> (239.99 a night)	_____ =	<b>\$</b> _____
May 20 & 21, 2017	_____	_____	<b>\$523.18</b> (239.99 a night)	_____ =	<b>\$</b> _____
May 19, 20, & 21 2017	_____	_____	<b>\$784.77</b> (239.99 a night)	_____ =	<b>\$</b> _____

**Special requests:** \_\_\_\_\_

**Total Charges:**      \$ \_\_\_\_\_

\_\_\_\_ Please charge my:        Visa           MasterCard           Amex           Discover           Diners Club   

**Credit Card#** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ / \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Office #** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Home #** \_\_\_\_\_

**Cell #** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **(Required)**

By my signature, I hereby agree to the terms & conditions of the cancellation policy as stated in this contract.

**Return Completed form to:**    **Comfort Suites**  
10 S. Hanover Street  
Carlisle, PA 17013

**PHONE: (717) 960-1000**  
**EMAIL: holly@centrehotel.com**  
**FAX: (717) 960-1010**