

**NYS Athletic Administrators Main Block 2009**  
**March 17, 2009 - March 21, 2009**

**Room Block Cutoff Date:**

**Sunday, February 15, 2009**

Please reserve your room before this date to secure the group rate.

The Saratoga Hilton is the Headquarter hotel. When the room block is full, reservation forms will be automatically forwarded to the Courtyard by Marriott.

**Reservation Guarantee:**

All reservations must be guaranteed using a credit card or advance deposit.

Guests will be penalized for early departure. All reservations must be guaranteed for the entire stay. Unless the reservation is changed prior to check-in, guests having an early departure will be charged the full room rate for their entire scheduled stay.

Please indicate the appropriate credit card information below. Visa, Master Card, American Express & Discover are all acceptable. Or send a check or money order in the amount of one night's stay.

**Cancellation Policy:**

Cancellation less than forty-eight (48) hours prior to the scheduled arrival date will result in forfeiture of your deposit or if a credit card was used, a charge equal to one night's stay will be applied to the credit card.

**Tax Exempt Information:**

If your exempt organization is paying for your stay, please submit your T/E form with your reservation.

**Purchase Orders:**

Purchase Orders or Vouchers are not accepted for guarantee but may be used for payment if submitted to the hotel at least 48 hours prior to arrival. These **cannot** be accepted at check-in.

*Complete this form and return by fax or mail to the address listed at the bottom of this page. Reservations can also be made by calling 888-866-3596 or online at [www.thesaratogahotel.com](http://www.thesaratogahotel.com) and requesting the following **Group Athletic Administrators Group Code: ABLC***

**ROOM RATES:**

<u># Rooms</u>	<u>Room Type</u>	<u>Single/Double/Triple/Quad</u>
_____	Hotel Room	\$115.00/\$115.00/\$125.00/\$125.00

Room rates are subject to combined taxes of 13% unless tax-exempt status has been approved – see tax-exempt information. Such tax is subject to change without notice.

**Reservation Information:**

Arrival: \_\_\_\_\_ Departure: \_\_\_\_\_ # Nights \_\_\_\_\_ # People \_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Hilton HHonors# \_\_\_\_\_

**List Roommates**

(please only submit one form per room) \_\_\_\_\_

**Guarantee:**     Credit Card     Deposit Check Attached

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Other Requests:**

The following are requests only and are on a first come first served basis

\_\_\_\_\_ King                      \_\_\_\_\_ Smoking  
 \_\_\_\_\_ 2 Double Beds    \_\_\_\_\_ Non Smoking    \_\_\_\_\_ Handicap Accessible

**Return this form to:**

**The Saratoga Hilton Reservations Department, 534 Broadway, Saratoga Springs, NY 12866**  
**Reservations Fax Number: 518-584-7430 • Questions or General Information: 518-584-4000 x602 or x603**