



STUDENT Package – Sat. to Sun. only

2348 Saranac Avenue, Lake Placid, NY 12946. PHONE: 518-523-4411 FAX: 518-523-9908

www.highpeaksresort.com/

RESERVATION FORM

American Association of University Women of New York April 26-28, 2013

Guest Name: _____

Share With: _____

College Attending _____

Mailing Address: _____

Phone Number: _____ - _____

Email: _____

Students pay no Conference Registration Fee.

Available Rates: (please signify by circling one of the following)

If you pick Double or Triple Rate – please list the roommate desired on the “Share With” line above

Total Package: \$215.80/Single \$ 146.30 /Double \$ 123.12 /Triple

- These packages include:
Saturday Dinner
Saturday Night Accommodation
Sunday Breakfast
Service Charges and Taxes

Tax Exemption requires an Exempt form and Organization Payment which must MATCH the exempt form

Arrival Date: _____ Departure Date: _____

Credit Card: American Express/MasterCard/Visa/Discover

Number: _____ Expiration: _____

Name on Card (please print clearly): _____

All Reservations must be secured with a deposit equal to one night’s accommodation.

Signature: _____

(As shown on the credit card)

Return form no later than April 5th, 2013 to:

Extended stay room only rate \$139

NO REFUNDS ON PARTIAL PACKAGES/UNUSED MEALS / EARLY CHECK OUT
You will be responsible for all original room nights booked from your intended stay.
Cancellation within seven (7) days of arrival will be charged for the full package price.
Cancel by 3:00 pm on April 15th, 2013 without penalty.

[Any forms not filled out accurately will not be guaranteed a room.](#)

Room confirmations will be sent via email for your records.

Check-in Time: 4 pm; Check-out Time: 11 a.m.