



NAME OF GROUP: ACCA-PHCC OHIO CONVENTION  
RESERVATION ID: CO 8263 03  
DATES: Tuesday, 03/17 - Sunday, 03/22/09

CHECK IN 4:00 PM  
CHECK OUT 11:00 AM  
NO PETS PERMITTED

ALL REQUESTS FOR THE ABOVE GROUP  
MUST BE RECEIVED BY: 02/15/09

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

DAYTIME TELEPHONE \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

Please list the names of all guests that will occupy this room other than the person listed above.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Please use one form per room request.  
Please specify how you would like to receive confirmation  
\_\_\_\_\_ by mail \_\_\_\_\_ by fax \_\_\_\_\_ by email

**DEPOSIT INFORMATION**

A deposit equal to one night's stay must accompany this form for confirmation. Check, money order, or credit card are the accepted forms of payment. Deposits on credit cards are processed the day the request is received. Cancellations and deposit refund requests will be accepted up to 3 days prior to arrival.

CHECK # \_\_\_\_\_ ENCLOSED FOR \$ \_\_\_\_\_

AMEX     VISA     MASTERCARD     DISCOVER

CREDIT CARD # \_\_\_\_\_ EXP. \_\_\_\_\_

CARDHOLDER'S NAME \_\_\_\_\_  
(printed as it is on card)

SIGNATURE \_\_\_\_\_

Please be sure the expiration date on the credit card is valid through the date of your arrival.

Arrival Date _____ / _____ / _____ (month) (day) (year)
Departure Date _____ / _____ / _____ (month) (day) (year)

<u>ACCOMMODATIONS REQUESTED</u>	<u>RATES *</u>
_____ Single Occupancy @	\$95.00
_____ Double Occupancy @	\$95.00
_____ Triple Occupancy @	\$95.00
_____ Quad Occupancy @	\$95.00

\*Occupancy based on the number of adults in room  
sales Tax is additional (currently 6½% sales tax & 5% bed tax)

Please check preference: ___ Non-Smoking ___ Smoking
_____ Handicap Accessible
Special requests can be noted, but not guaranteed. We will do our best to accommodate your request at check-in.
___ Crib - No Charge
___ Rollaway - \$15 per night plus tax
___ Refrigerator - \$10 per night plus tax

*All room requests must be in writing, including changes and cancellations. Please include your confirmation number with all correspondence. Phone calls requesting changes will be accepted one week prior to the arrival date by dialing 1-800-SAWMILL.*

**REMIT TO:**  
**THE LODGE AT SAWMILL CREEK**  
**HOUSING BUREAU**  
**400 SAWMILL CREEK**  
**HURON, OHIO 44839**

**OR FAX TO 419 433-7610**