

Accommodation & Shuttle Reservation for 'Brain Education Festival'

PLEASE PRINT CLEARLY

After filling out the application, please send **a picture** of this form **via text message** to **<u>845-210-3098</u>** or email to <u>reservations@honorshaven.com</u>. If you have any questions, please contact Reservations at 844-469-7829.

Your information

Program name	Brain Education Festival	Program Date	<mark>9/9/2022 –9/11/2022</mark>	
Name		Gender	□ Male	□ Female
Street Address				
City/State/Zip		Center Name		
Phone (Mobile/Home)		E-mail		

Accommodation & Payment information

Check-in& out	From 09 /09/2022 to 09/11/2022 *Check-in: 3:00pm, Check-out: 11:00am				
	Please check appropriate boxes below (Rooming is limited):				
Room occupancy	□ Single Occupancy: \$228/Night + tax*				
	□ Double Occupancy: \$156/Night + tax*				
	Open share *If no share is available, guest will be responsible for single occupancy rate.				
	□ Room shared with (name/center) :				
	*Both guests must reserve their shared room within 2 days of initial booking, otherwise the				
	roommate may not be guaranteed.				
Payment type	□Visa □Master □AMEX □Discover □Check (payable to Honor's Haven)				
Card Number		Exp Date:			
Cardholder's Name					

** If the cardholder is not the guest staying, please complete the Credit Card Authorization form.

Premium Package (Premium package applicant only)

□ \$180 (Flat fee)			
 Premium Accommodation -Room Upgrade based on availability -Shuttle service from Newark airport to Resort (round trip) -One 10% discount Gift Shop coupon 			
Pick Up: September 9 th , 10 AM at Terminal B **DEPARTURE LEVEL Door 1 (3 rd Floor)			
September 11th , 1:00 PM from Honor's Haven Main Lobby to Newark Airport			
Airline: Flight No: Arrival Time:			
Airline: Flight No: Departure Time:			

Please reserve flights to account for the shuttle times above at Newark Airport. Your flight arrival time should be no later than9:00amfor the 10 am shuttle.Your departure flight should be no earlier than4:30 pm.

Your credit card and photo ID must be presented at check-in.



1195 Arrowhead Road, Ellenville, NY 12428 **Toll Free : 844-469-7829** honorshaven.com

CREDIT CARD AUTHORIZATION FORM

Program name	Brain Education Festival	Program Date	<mark>09/9/2022 – 09/11/2022</mark>
Guest Name			

Cardholder information

Cardholder's Name						
As it appears on the Card						
Payment type	□Visa	□ Master	\Box AMEX	□ Discover		
Card Number						
Billing Address	Street:					
	City:		State:		Zipcode:	
Phone Number	Mobile: Business/home:					
Email Address						

*A valid telephone number and email are required to confirm receipt. If we are unable to do so, your reservation will be subject to

cancellation.

I hereby authorize the following charges to be applied to the following credit card. (Check all that apply):

Room & All Applicable Taxes only	Other (Leave details below)
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Comments:

I hereby authorize the following amount be applied to the credit card (applicable sales tax and service charges may apply):

Card Holder Signature: ______ Current Date: ______

* Hotel reserves the right to refuse a credit card authorization as a valid method of payment for same day bookings.

Full payment will be charged upon receipt.

All information is kept confidential and used only for the purpose noted above.