



2017 SPRING CONFERENCE AND TRADE SHOW



HILTON GARDEN INN — SARATOGA SPRINGS, NY
Welcomes the New York Press Association
Thursday, April 6 - Sunday, April 9, 2017

HOTEL RESERVATION FORM



ROOM CUT OFF DATE — FRIDAY, MARCH 10, 2017
CHECK-IN — 4:00 PM • CHECK-OUT — 11:00 AM

Thank you for selecting the Hilton Garden Inn Saratoga Springs. In order to make your reservation process more efficient, please complete this reservation form and return it to the hotel either by email, mail or fax. We will return a confirmation to your attention. Please note that reservations must be received prior to the cut-off date listed below in order to receive the discounted group rate. **Otherwise, reservations will be taken only on a space and published rate available basis.**

The Gideon Putnam is the main convention hotel. The Hilton Garden Inn offers a modern alternative for accommodations. No sessions will be offered at the Hilton.

Single or double occupancy — \$149.00 + applicable taxes.

PLEASE PRINT OR TYPE: (CLEARLY)

Arrival Date: _____ Departure Date: _____

Guest Name: _____ Daytime Phone: _____

Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: *(You'll receive your confirmation via this email)* _____

Sharing Room with: *(Please be sure that only the main guest submits this form)* _____

We will do our best to accommodate your requests, however, at times this may not be possible. We will always select the best room available.

OCCUPANCY: (Request Only) 1 king bed 2 double beds

FORM OF PAYMENT:

* Please list credit card information below. If you chose to, this form can be used as an authorization form for the traveler staying at our hotel.

Credit Card # _____

Expiration Date: _____ CVV2: _____

Name of Card Holder: _____

Name of Guest: _____

The above credit card will be used to: *(Please choose one of the following)*

- Guarantee the reservation only *(a credit card will be presented at check-in with the travelers name on it)*
- Pay for room and tax *(a personal card will be given at check in for additional charges)*
- Pay for room charges only, due to tax exemption *(Please attach Tax Exempt form)*
- Pay for all charges

* Please attach a copy of the front and back of the credit card, copy of the card holders drivers license and a tax exempt form (if applicable) if this form is intended to be used as an authorization form.

MAIL, FAX OR EMAIL TO THE SALES DEPARTMENT AT:

DO NOT SEND CURRENCY — Make Checks or Money Orders Payable to:

HILTON GARDEN INN SARATOGA SPRINGS
125 South Broadway, Saratoga Springs, NY 12866

Phone: 518-587-1500
Fax: 518-587-7800

Email: Laura.Lillo@hilton.com

Visit www.saratogasprings.hgi.com for hotel details

