



**NYS EDUCATION DEPARTMENT
NETWORK TEAM – SUMMER INSTITUTE
MONDAY, AUGUST 1, 2011 – FRIDAY, AUGUST 5, 2011**



RESERVATION DEADLINE: MONDAY, JULY 11, 2011

WHEN MAKING ROOM RESERVATIONS, PLEASE KEEP IN MIND:

- YOUR LEA / BOCES MUST BE A MINIMUM OF 35 MILES FROM THE HOTEL.
- COMPLETE ONE FORM PER ROOM. (ALL ROOMS MUST HAVE A MINIMUM OF (2) PEOPLE PER ROOM. IF YOU DO NOT SELECT YOUR OWN ROOMMATE ONE WILL BE ASSIGNED TO YOU.)

NAME:	_____	IS YOUR LEA / BOCES (35+) MILES FROM THE HOTEL?:	_____
LEA / BOCES:	_____		
ADDRESS:	_____		
CITY / STATE:	_____	ZIP CODE:	_____
PHONE NUMBER:	_____	EMAIL:	_____

ROOMMATE NAME:	_____	IS YOUR LEA / BOCES (35+) MILES FROM THE HOTEL?:	_____
LEA / BOCES:	_____		
ADDRESS:	_____		
CITY / STATE:	_____	ZIP CODE:	_____
PHONE NUMBER:	_____	EMAIL:	_____

RESERVATION INFORMATION

Date of Arrival: _____ Date of Departure: _____

Special Requests are based on availability and are not guaranteed

Accessible Dietary Restrictions: _____ Other: _____

PAYMENT INFORMATION

A LIMITED NUMBER OF ROOMS, AVAILABLE ON A FIRST COME FIRST SERVED BASIS, WILL BE PAID FOR BY THE DEPARTMENT OF EDUCATION FROM AUGUST 1ST – AUGUST 5TH. IF YOU ARE ARRIVING PRIOR TO AUGUST 1ST OR STAYING ON AUGUST 5TH OR LATER, YOU ARE RESPONSIBLE FOR YOUR OWN PAYMENT OF THE EXTRA NIGHTS AT A RATE OF \$96.00 PER ROOM PER NIGHT, PLUS NYS TAX (IF APPLICABLE)

Payment is ONLY required if you are staying prior to August 1st or August 5th or after. All reservations will require either a Credit Card, a Purchase Order or a Voucher which must be provided at the time the reservation is submitted. Please note that credit cards will only be used to guarantee your room and will not be charged if another form of payment is presented at check in.

Credit Card Number:	_____	Expiration Date:	_____
Name of Cardholder:	_____	Signature:	_____
Purchase Order # <small>(please include copy with reservation form):</small>	_____	Name of Agency:	_____

TAX EXEMPTION INFORMATION

Exemption from NYS & Local Taxes will only apply if the Hotel is supplied with the proper Exemption Certificate prior to arrival. Tax Exemption Forms should be included when submitting your Reservation Form. Please note that your form of payment must match your Exemption Form to be considered exempt. If the Exemption Form is not on file prior to arrival, you will be billed as part of the Taxable Package.

CANCELLATION

If you find that you need to cancel your reservation please do so 48-hours prior to arrival. Reservations cancelled after this time will be billed the full amount of the stay to your LEA / BOCES.

PLEASE FORWARD COMPLETED RESERVATION FORMS TO:

Holiday Inn Albany on Wolf Road
205 Wolf Road ~ Albany, NY 12205
Phone: 518-458-7250 Fax: 518-458-7377 Email: prowe@hialbanywolf.com

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