

17th ANNUAL NORTH AMERICAN JEWISH CHORAL FESTIVAL

July 16-20, 2006

Reservation Request Form

Deluxe Accommodations- Two (2)-Night Minimum Single Occupancy - Per Person, Per Night \$172.00 WITHOUT service charges +\$24.30 (service charges) \$196.30 Inclusive of service charges Triple Occupancy - Per Person, Per Night \$104.00 WITHOUT service charges +\$14.40 (service charge) \$118.40 Inclusive of service charges	Double Occupancy – Per Person, Per Night \$130.00 WITHOUT service charges +\$18.00 (service charge) \$148.00 Inclusive of service charges Quad Occupancy – Per Person, Per Night \$94.00 WITHOUT service charges +\$13.35 (service charges) \$107.35 Inclusive of service charges
Economy (Non-Renovated) Accommodations- Two (2)-Night Single Occupancy - Per Person, Per Night \$ 136.00 WITHOUT service charges +\$19.65 (service charges) \$155.65 Inclusive of service charges	· ·
Rates Include: Overnight accommodations, three (3)Meal daily starting with dinner on day of arrival through lunch on day of departure, Cocktail Reception Wednesday evening featuring a one hour open bar as well as hot & cold hor d'oeuvres, welcome reception Sunday afternoon featuring coffee, tea & cookies and access to resort activities as well as the spa, Applicable Service Charges are included (Rates are subject to prevailing NYS Tax)	
Children's Rates- As Third & Forth Occupant Children 5 and Under Children 6-12- Per Child, Per Night FREE \$ 25.50 WITHOUT service charge +\$3.83 (service charges) \$29.33 Inclusive of service charge Rates Include: Overnight accommodations, shared with parent(s), three (3) meals daily starting with dinner on day of arrival through lunch on day of departure, Welcome reception Sunday afternoon feuturing coffee, tea & cookies and access to resort activities Applicable Service Charges are included (Rates are subject to prevailing NYS Tax) PLEASE PRINT OR TYPE	
Name:	
Address:	
City/State/Zip	
Home Phone:	Office Phone
Arrival Date:	Departure Date:
Sharing Room with: *Hotel is not responsible for assigning roommates	
1.	3.
Method of Payment	
Credit Card Number:	Name on Credit Card:
Expiration Date,	Signature:
Check Information	Money Order Information:

*DEPOSIT: Individuals are required to provide the Hotel with a deposit equal to the first night stay with this form by **June 16th**, **2006**. Make checks payable to Hudson Valley Resort & Spa. We also accept MasterCard, Visa, Diner's Club, and Discover Cards for deposit – please complete the information requested:

*After the cut off date, or when your room block has filled, the Hudson Valley Resort & Spa will accept group reservations on a space availability basis.

PLEASE MAIL, E-Mail, OR FAX THIS FORM TO:

Hudson Valley Resort & Spa, 400 Granite Road, Kerhonkson, NY 12446 Attn: Reservations Department, FAX: (845) 626-2677, Phone 1-845-626-8888 Email: <u>res@hudsonvalleyresort.com</u>

^{*}Any and all cancellations made less than seven (7) days prior to arrival will be subject to the forfeiture of the individual's deposit. Individuals who are categorized as a "No Show" will be billed in full.