

# University of Pennsylvania Alumni/Commencement 2011

## The Hilton Inn at Penn Hotel Reservation Request

Thank you for your interest in staying at The Hilton Inn at Penn during the University of Pennsylvania's 2011 Alumni Weekend. Please complete the requested information below and return it as indicated. Please note that **rooms will be based upon availability at the time this request is received** by The Inn at Penn. If we are unable to confirm a reservation, we will call you to ask if you want to be included on a waitlist.

**Terms and Conditions:**

The rate below includes a deluxe guestroom for single or double occupancy. Additionally the current 15.2% tax (subject to change) will apply. To make your reservation, complete this form and mail or fax it to The Hilton Inn at Penn Reservations Department. Your credit card account will be charged as soon as the reservation is processed. Expect a confirmation letter with a receipt within 30 days. **Check in on the 13<sup>th</sup> is 4:00 PM.** Arrivals prior to 4:00 PM will be accommodated as rooms become available.

**Cancellation Policy:**

If you need to revise or cancel your reservation, you must do so before October 1, 2010. You will receive a refund of your deposit minus a \$150 processing fee per contracted room. ***Cancellations after October 1, 2010 will result in full forfeiture of your deposit. (NO EXCEPTIONS).***

Note: These are the minimum booking options. Mark an X in front of your choice. Additional nights (Thursday/Tuesday) upon request.

- **May 13-15, 2011 2 nights – Fri and Sat nights \$429 per night plus applicable taxes**
- **May 13-17, 2011 4 nights – Fri, Sat, Sun and Mon nights \$449 per night plus applicable taxes**

Check here if you want to be called with information on Suite rates and availability.

**RESERVATION INFORMATION**

Name \_\_\_\_\_ HHonors# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Fax \_\_\_\_\_

Number of Rooms \_\_\_\_\_ Number of People \_\_\_\_\_ Email \_\_\_\_\_

|                   |                        |                      |                         |                      |
|-------------------|------------------------|----------------------|-------------------------|----------------------|
| <b>Preference</b> | <b>Circle Bed Type</b> | <b>One King Bed*</b> | <b>Two Double Beds*</b> | <b>No Preference</b> |
|-------------------|------------------------|----------------------|-------------------------|----------------------|

\*All guestrooms are non smoking.

Please return this form as soon as possible to The Hilton Inn at Penn,  
 Attention Reservations: 3600 Sansom St, Philadelphia, PA 19104. You may fax requests to 215-823-6229.  
 Please call reservations at 215-823-6240 with any questions. We look forward to your visit.

***My signature indicates that I have read and understand the terms / conditions of the contract and that I am explicitly aware of the cancellation charges outlined above.***

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

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 For Office use Only

Date Received \_\_\_\_\_ Initials \_\_\_\_\_ # \_\_\_\_\_