

**Hotel Continental Plan
Housing Reservation Form
2010 PA FCCLA State Conference
Seven Springs Mountain Resort
March 17 or 18, 2010**

(**Only** to be used by parents, alumni, evaluators, exhibitors or special guests who need a room for one night)

The Continental Plan, plus taxes includes breakfast. Use one form per room.

- ✓ Cost per room per night, including tax **per room** for single/double per night is \$136.25
- ✓ Additional \$49.05, including tax **per person** per night for a third and fourth person in the room
- ✓ Check payable to “*Seven Springs Mountain Resort*”
- ✓ Deadline for room reservation is received by **February 11, 2010**
- ✓ Mail form and payment to:

Reservations
Seven Springs Mountain Resort
777 Waterwheel Drive
Seven Springs, PA 15662
Tel: 866.437.1300 Fax: 814.352.2010

Name of person reserving room: _____

Address _____

Telephone _____

Choose one of the options, depending on number of people in the room

Type Single Double Triple Quad Accessibl e	Room No. Given by hotel at check- in	Name	A D U L T	S T U D E N T	S e x M / F	Indicate Arrival Date/ Time	Indicate Departure Date/ Time	Room Cost per night (includes 9% tax)	Total Cost
Single		1.						\$136.61	
Double		1. 2.						\$136.61	
Triple		1. 2. 3.						\$185.66	
Quad		1. 2. 3. 4.						\$234.71	
Total due									\$

Checkmark method of payment: _____ Check _____ Money order _____ Credit Visa, MasterCard, American Express, and Discover credit cards accepted

Name on credit card: _____ Credit Card Number: _____

Credit card security code: _____ Credit card expiration date: _____