



The Saratoga Hilton Hotel

534 Broadway, Saratoga Springs, NY 12866
Fax #: 518-584-7340
www.thesaratogahotel.com



*** HOTEL LODGING ROOM & MEAL PLAN RESERVATION FORM ***

Group Name: NORTHEAST DAIRY CONVENTION September 20th, 2009 - September 23rd, 2009
Sponsored by: Northeast Dairy Foods Association, Inc. & PA Assoc. of Milk Dealers

Reservations must be received by August 28th, space & rooms are not guaranteed after this date

Please Print Clearly

Name: _____

Spouse or Guest Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Cell Phone: _____

Email: _____ Will be used for confirmation purposes only

Arrival Date: _____ (check in time 3:00PM) Departure Date: _____ (check out time 11:00am)

Please reserve a _____ Single Room _____ Double Room * all rooms are non-smoking *

Rates for nights stayed during Sept. 20-23 Only, for **All other** nights please call the Hotel # below

3 night room/meal rate: Single: \$699+tax or Double: \$861+tax

2 night room/meal rate: Single: \$450.40+tax or Double: \$542.80+tax

Meals included are: Sunday & Tuesday Dinners, Monday, Tuesday and Wednesday Breakfasts

*** PACKAGES ARE FIXED - NO SUBSTITUTIONS OR VARIATIONS ***

Credit Card Number: _____ 3 digit Security Code _____ Exp. Date: ____/____/____ Card Type: _____

Card Holder Name: _____

Card Address if different from above _____

A one night deposit or credit card number is required to guarantee the reservation. Cancellations made less than (3) days of arrival will result in a one night package charge penalty. Confirmations will be sent to you by email or mail.

Please list any special needs you may have: _____

FAX or MAIL DIRECTLY TO THE HOTEL

ATTN: Hilton Hotel - Reservations Department

534 Broadway, Saratoga Springs, NY 12866

Fax: 518-584-7430 For Reservation Questions Phone: 1-518-693-1018

Please fax or mail your reservation, *Reservations cannot be made over the phone or online.*

Thank You!