



# North American Jewish Choral Festival July 16 - 20, 2017

## Reservation Request Form

### RATES: Per Person, Per Night

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Single Occupancy<br>\$208.00 | <input type="checkbox"/> Double Occupancy<br>\$158.00 | <input type="checkbox"/> Triple Occupancy<br>\$140.00 | <input type="checkbox"/> Quad Occupancy<br>\$123.00 |
|---|---|---|---|

**Rates Include: Deluxe Overnight accommodations, Three (3) meals daily.**

#### Children's Rates When Sharing Room With An Adult

- |                                     |                   |
|-------------------------------------|-------------------|
| <input type="checkbox"/> Ages 0-5   | Free              |
| <input type="checkbox"/> Ages 6-12  | \$40.00 Per Night |
| <input type="checkbox"/> Ages 13-17 | \$75.00 Per Night |

**Rates are subject to NYS Tax and 15 % Service Charges**

Cots are available for \$15.00 per cot, per stay

### DAY CAMP

- Children Ages 6-16 \$35.00 Per Day  
# Of Children \_\_\_\_\_

It is required that you register your children prior to arrival

#### Economy Accommodations

- |   |          |
|---|----------|
| <input type="checkbox"/> Single Occupancy | \$176.00 |
| <input type="checkbox"/> Double Occupancy | \$123.00 |

Not Renovated, Limited Availability  
**Rates are subject to NYS Tax and 15 % Service Charges**

## PLEASE PRINT OR TYPE

<b>Name:</b>	
<b>Address:</b>	
<b>City, State, Zip:</b>	
<b>Home Phone:</b>	<b>Office Phone:</b>
<b>Arrival Date:</b>	<b>Email Address:</b>
<b>Departure Date:</b>	

#### Sharing Room With:

1.	2.
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**Special Needs Request:**

DEPOSIT: Individuals are required to provide the Hotel with a deposit by June 25, 2017. Deposits are equal to the first night's stay. **Make checks payable to Hudson Valley Resort & Spa.** We also accept MasterCard, Visa, and Discover Cards for deposit – please complete the information requested below:

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.

After the cutoff date, June 25, 2017, the group rate quoted may no longer be available, and all charges will reflect current prevailing rates.

Method of Deposit Payment:

<b>Check:</b>	
<b>Credit Card Type:</b>	
<b>Name on Credit Card:</b>	
<b>Credit Card No.:</b>	
<b>Expiration Date:</b>	<b>Three (3) Digit Code</b>
<b>Signature:</b>	<b>On signature line:</b>

PLEASE MAIL OR FAX THIS FORM:

OR

PLEASE CALL THE RESERVATIONS DEPARTMENT:

**Hudson Valley Resort & Spa**  
400 Granite Road  
Kerhonkson, NY 12446  
Phone: (845) 626-8888 ext 3090  
FAX: (845) 626-2677