

Card Holder Authorized Signature: \_\_\_

## **Campbell University / Trust Education Foundation**

## **2016 Trust Advisors Forum**

Booking ID #43115 Saturday, February 20-Wednesday, February 24, 2016

We look forward to welcoming you to Pinehurst! Please take a moment to fill out this reservation form to ensure your accommodations for your upcoming visit. Pinehurst requires that your reservation request form be completed and returned on or before 5:00pm EST Thursday, January 21, 2016. Reservation forms received after this date will be processed on a "space-available basis". Pinehurst consists of a variety of accommodations including the Carolina, Villas (which ae considered part of the Carolina), Holly Inn, The Manor Inn and Condominiums. THE RESORT WILL MAKE EVERY EFFORT TO HONOR SPECIFIC ROOM REQUESTS. If your request is not available, the best substitution will be made.

(Please Check Desired Occupancy)

** Should th	LY RATES: <u>European Plan</u> LOCA ne number of group room reservations e d to place the additional reservations re	xceed what has been contract	ted for these building	
-	\$156.00 per room per night (One guest per room)	DOUBLE Occupancy: _ (Two or more		
SINGLE Occupancy:	DAILY RATES: <u>European Plan</u> \$116.00 per room per night (One guest per room)	(Two or more	\$79.00 per g e guests per room)	uest per night
Arrival Date	Rates are per guest, per nig	arture Date		
Till Balo		Check-Out Time: 12:00 N		
State sales tax of 6.75% a in-room high speed intern faxes, afternoon tea in the availability). Package mea meals and beverages in c transportation staffs do no your discretion. State and DEPOSIT AND CANCEL made. Pinehurst must receptable FAX: 910 RESERVATION	& STATE SALES TAX: For your convenier and occupancy tax of 3% are additional. The et, unlimited use of the fitness center, bicycle Carolina, self & valet parking, on-call transfal gratuities for staff in the dining venues as our resort dining outlets, a separate 18% self participate in the resort service fee. Grated county taxes are subject to change without LATION POLICY: A deposit representing of ceive notice of any cancellation at least 30 cete and fax or mail with deposit to: 0-235-8240 ONS PHONE: 855-295-9940  IPIED BY: (Type or Print all names)	e Resort Service Fee covers the cles, practice putting greens, pitch sportation, outdoor pools and be well as the bell and door staff a rvice charge is added to your actuities in addition to the above arut notice.  The night's rate per guest is charted the process of the coverage of th	e following amenities a ching areas, driving ra each club (based on so are also included. For ecount. Housekeeping and for any other resort reged at the time the re- rival in order to refund	and services: ange, in-coming easonal non-package g and staff are at servation is a deposit.
Name	Address		City Stat	te Zip
Home Phone ()_	Business Phone (	_) E-Mail		
Name	Address		City Stat	te Zip
Home Phone ()_	Business Phone (	_) E-Mail		
CREDIT CARD INFOR	MATION FOR ROOM DEPOSIT(S):			
Credit Card Name & No	umber		EXP	/
Card Holder Name				