

Cooperstown All Star Village

Room Agreement

Date of Arrival: _____ (Saturday) /

Date of Departure: _____ (Friday)

Number of Rooms: _____

Type of Room: _____

Rate for Room: \$ _____

Tax Amount: \$ _____ (Sales Tax 8% & Bed Tax 4%)

Total Amount Due: \$ _____

Deposit: \$ _____ 50% of Total Amount Due

Balance Due: \$ _____

I understand that I take full responsibility for the above room(s). If there are any changes or cancellations they must be done 90 days in advance of the arrival date. I understand that if I do cancel within 90 days of the arrival date for any reason, I forfeit 50% of the total weekly stay. Our weekly rate includes: a four cubic foot refrigerator, hair dryer, coffee maker, cable television and air conditioning. Housekeeping services includes daily towels and daily garbage removal only.

www.cooperstownallstarvillage.com 1-800-327-6790 / Ext#338

We accept: Visa, MasterCard and American Express.

Card Number: _____

Expiration Date: _____ / _____ (MM/YY)

I would like to pay 50% of the total weekly stay: \$ _____

Signature: _____ Date: _____

(I agree to pay the charges on my credit card based on this agreement.)

Name: _____ (please print)

Address: _____ City: _____ State _____

Zip Code: _____ Telephone#: _____

Email: _____ Fax#: _____

Team Name: _____

Note: This room agreement does not guarantee you a room. Once your 50% deposit has been received and you have a confirmation letter, your room is guaranteed. Please fax this agreement back to (607) 432-1076. Taxes are subject to change. No pets allowed.