



**441 Electronics Parkway  
Liverpool, New York 13088  
Phone (315) 457-1122 Fax (315) 451-0675**



**439 Electronics Parkway  
Liverpool, NY 13088  
Phone (315) 457-1900 Fax (315) 457-7814**

Group Name: NYS Band Directors	
Group Code: BAN	
Arrival Date: March 1, 2019 # Nights: 2	
<p><b>The group rates listed below are guaranteed until 1/30/19. The rate is based on availability after 1/30/19.</b></p>	
<b>THE HOLIDAY INN:</b>	
<p><b>Rates Per Room Per Night:</b> -King Bed: \$131.00</p>	
<p style="text-align: center;"><b>The Holiday Inn Syracuse/Liverpool is 100% smoke-free.</b></p>	
<b>THE STAYBRIDGE SUITES:</b>	
<p><b>Rate Per Room Per Night:</b> -Studio(Queen): \$141.00 -Two-Bedroom Suite (1 king room &amp; 1 double room): \$282 <b>The Staybridge Suites is 100% smoke-free (Please specify in room type section on this form).</b></p>	<p><b><u>DIRECTIONS:</u></b> <b>From North and South:</b> Interstate 81 to Exit 25 (7<sup>th</sup> North Street). Take a right off the exit onto 7<sup>th</sup> North Street. Follow road one mile to the end. <b>From East and West:</b> NYS Thruway (I-90) to Exit 37 (Electronics Parkway). The hotel is located directly across the street from the toll booth.</p>
<p>To guarantee reservations, the hotel requires a valid credit card and signature or one nights' room and tax deposit.</p> <p>We are pleased to honor the following Credit Cards: American Express, Carte Blanche, Diners Club, Discover, MasterCard and Visa</p> <p>The hotels are unable to provide Tax Exempt forms. Tax Exempt forms must be submitted upon check-in or mailed with this form.</p> <p><b>Kids DO NOT eat free with a group rate.</b></p> <p>Rollaway beds are an additional \$10.00 each per night.</p> <p><b>There is NO additional charge for up to 4 people in a room.</b></p> <p>Non-guaranteed reservations are held until 3PM the day prior to arrival.</p>	<p><b><u>RESERVATION INFORMATION:</u></b></p> <p>NAME: _____</p> <p>ROOMMATE: _____</p> <p>ROOM TYPE REQUEST* (Circle Choices):          Staybridge Suites Studio or Two Bedroom Suite          Holiday Inn-King  <i>We do our best to fulfill room type requests but they are based on availability.</i></p> <p>ARRIVAL DATE: _____</p> <p>DEPARTURE DATE: _____</p> <p>ADDRESS: _____</p> <p>CITY: _____</p> <p>STATE: _____ ZIP CODE: _____</p> <p>DAYTIME PHONE: _____</p>

*Please provide an e-mail address if you would like a confirmation sent:*

E-MAIL: \_\_\_\_\_

WWW.STAYSYRACUSE.COM

**Please mail or fax this form to the above address or fax number. If you have questions, please call either of the above phone numbers.**