

# NEW YORK STATE BAR ASSOCIATION

## ACCOMMODATIONS REQUEST FORM

### PERSONAL INFORMATION

Please print or type names of all persons who will occupy the room

Name (s) \_\_\_\_\_

Names/Ages of Children \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_

### HOTEL INFORMATION

**European Plan Room Rate Per Night Includes Private Group Dinner Nightly. Plan cannot be used in the Hotel Restaurants.** If you choose to eat dinner at any of the hotel restaurants on your own, you will be charged ala carte for food and will not be rebated money from the plan included in the room rate.

A **limited** number of rooms is available in each rooming category. **Please indicate your first, second and third room choice:**

		SINGLE	DOUBLE
_____	Walk-In Lodge Room	\$245.00	\$331.00
_____	Lower Lodge Suite	\$345.00	\$431.00
_____	Walk-In Lodge Suite	\$365.00	\$451.00
_____	Hotel Room Garden View	\$295.00	\$381.00
_____	Hotel Room Lake View	\$315.00	\$401.00
_____	Hotel Suite Garden View	\$385.00	\$471.00
_____	Hotel Suite Lake View	\$415.00	\$501.00

Arrival date: \_\_\_\_\_

Departure date: \_\_\_\_\_

Check-In Time 4:00 p.m.

Check-Out Time 11:00 a.m.

**Additional charges apply to above rates for more than 2 adults sharing a room.** State and local taxes on the room, food, beverage and incidentals is 7%. Additionally, there is a 4% Warren County occupancy tax applicable to the room portion of the above rates.

**Please Note: Hotel reservations can only be made by mail or fax using this form.** Meeting registration form and fee(s) must accompany accommodations request.

### PAYMENT INFORMATION

☐ Check or money order enclosed in the amount of \$ \_\_\_\_\_  
(Make checks payable to **THE SAGAMORE.**)

☐ Charge \$ \_\_\_\_\_ to ☐ American Express ☐ MasterCard

☐ Visa Expiration date \_\_\_\_\_

Card number: \_\_\_\_\_

3-4 Digit Security Code on Back of Card \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**GROUP BOOKING CODE: ILP014**

## Intellectual Property Law Section

### Fall Meeting

**October 23 - 26, 2014**

**The Sagamore Resort  
Bolton Landing (Lake George), NY**

### Cut-Off Date:

**September 29, 2014**

Reservations received after the above date will be accepted on a space and rate availability basis.

### Children's Rates:

For each additional person (over two people) age 13 and up sharing a room, there will be an additional room charge of \$25.00 per person plus tax, per day. Meals for children age 17 and under will be á la carte except for group dinners - children must be registered for these using the meeting registration form.

### Deposit Policy:

A credit card is required for all reservations. A non-refundable \$35.00 processing fee will be charged at the time of booking. At 14 days prior to arrival, the remaining balance due for the duration of guest's stay will be charged to credit card.

### Cancellation Policy:

Cancellations and reservation changes must be made at least 14 days in advance of your arrival date. Guests will be responsible for payment of original reserved length of stay if changes are made less than 14 days prior to original reserved arrival date. \$35.00 processing fee will be incurred for reservations cancelled outside 14 days prior to arrival.

### Please return this form with deposit information to:

Catheryn S. Teeter  
Meetings Representative  
New York State Bar Association  
One Elk Street  
Albany, New York 12207  
Phone: 518-487-5573  
Fax: 518-463-5993  
cteeter@nysba.org

