



2013 Football Full Season 6-Game Agreement



IMPORTANT INFORMATION

1. This Agreement is for a full season package – 6 Home Games
2. Payment in full is due at time of booking.
3. Rates listed below are for the 2-night stay of Friday and Saturday per weekend and include tax and **ONE PARKING PASS PER ROOM.**
4. Cancellations must be received in writing at least 14 days prior to arrival. A processing fee of \$150.00 per room will be charged for each room canceled. **Any cancellations received with less than 14 days written notice will not receive any refund.**
5. We must receive written notification at least 48 hours prior to arrival if you want to allow another person to check into your room. If we are not given the name, your guest will not be allowed to check in.
6. We will make every effort to honor special requests, however, they are not guaranteed.
7. Reservations cannot be made until signed Agreement and payment are received by hotel.
8. Upon receipt of this signed Agreement, your reservation(s) will be made, payment will be processed, and we will e-mail you confirmation number(s)

9. Please be aware that this form must be returned by November 16th 2012

2012 SCHEDULE

Vs. South Carolina – 9/6 & 9/7/13	Vs. North Texas – 9/20 & 9/21/13	Vs. LSU – 9/27 & 9/28/13
Vs. Missouri - 10/11 & 10/12/13	Vs. Appalachian State 11/8 & 11/9/13	Vs. Kentucky – 11/22 & 11/23/13

SELECT YOUR ROOMS (SAME ROOM TYPE FOR ALL 6 GAMES)

	1 Queen Bed	1 King Bed With Sleeper Sofa	2 Double Beds
Enter Number of Rooms Requested:			
Total Value If Purchased Separately	\$3,030.00	\$3,090.00	\$3,174.00
Special Full Season Savings	\$570.00	\$570.00	\$504.00
Your Price Per Room Full Season	\$2,460.00	\$2,520.00	\$2,670.00

GUEST INFORMATION

Guest Name:		Priority Club #
Street Address:		
City, State, Zip Code:		
Cell Phone Number:	Day Phone Number:	
e-mail address:		

PAYMENT INFORMATION & PAYMENT SUMMARY

Credit Card Number:	Expiration Date:
# of Packages _____ X Package Price \$ _____ = Total Amount Due \$ _____	

Guest Signature: _____

Date: _____

Please fax this form to Reservations Department at 706-354-6439 OR e-mail to reservations@hi-athens.com
OR mail to Holiday Inn Express, 513 West Broad Street, Athens, GA 30601
Questions???? Please call us at 706-546-8122