**The Hotel Fullerton - Reservation Request**

***Guest information***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name(s)** |  | | | | | | |
| **Address** |  | | | | | | |
| **Phone #** |  | | **Email** |  | | | |
| **Check in date** |  | **Check out date** |  | **# of nights** |  | | |
| **Room type requested** | |  | | | | | |
| **Credit Card** | |  | | | | **Exp** |  |
| **Cardholder Name** | |  | | | | | |
| **Special request** | |  | | | | | |

***For Hotel Use Only***

|  |  |
| --- | --- |
| **Confirmation Number** |  |

Email to [dan.cano@hfullerton.com](mailto:dan.cano@hfullerton.com) or fax to 714.520.4622

Check-In Time:  3:00 PM    Check-Out Time:  11:00 AM

**GUARANTEE POLICY:**

**All reservations require a valid credit card guarantee due at time of booking.**

**CANCELLATION POLICY:**

**Reservations must be cancelled 24 hours prior to arrival to avoid a penalty of one night room and tax.**