

Date Rec. _____

Resv. No. _____

**HOTEL RESERVATION FORM
GENERAL GRAND CHAPTER, ORDER OF THE EASTERN STAR
OCT. 25TH – NOV. 2ND, 2018**

Reservations must be received by Oct. 4, 2018

MAIL TO: Michael H. Feit, GGC Housing Chairman
PO Box 65455
Orange Park, FL 32065-5455

PHONE: (904) 264-2040
FAX: (904) 269-8174
E-mail: oesjoy@att.net

1. Reservations **MUST** be made through the Housing Chairman **ONLY**, by **Oct. 4th, 2018**
2. Hotel **WILL NOT** take telephone reservations for special OES Rates.
3. **DO NOT SEND ANY MONEY WITH THIS FORM.** A **confirmation # will be sent directly from the hotel** Please complete the bottom of this form regarding billing information as required for reservation/confirmation.
4. Credit card **may** be charged 1st night deposit 21 days prior to Arrival date.
5. Cancellations must be made at least **5 business days before arrival to avoid forfeiture of deposit with hotel.**
6. **ANY** changes in reservations, cancellations or additional rooms must be made directly with the Housing Chairman
Alterations to arrival/departure dates must be made 5 business days prior to arrival! Alterations to original reservations made **less** than 5 business days may result in hotel guest being responsible for full payment of original reservation.
7. **“Early Departure Fee”** (\$100.00) **MAY** be charged.
8. Hotel assignments will be based on availability by the Hotel.
9. Signature on this form acknowledges all conditions as stated above.

Hotel **NO RESORT FEE!!!** **Self-Parking “COMPLEMENTARY” for Registered Hotel Guests!!!**

Orlando World Center Marriott Resort & Convention Center **\$176.00 + tax** **Single/Quad**

Same Rate 3 Days Pre & 3 Days Post Based On Availability!!!

8701 World Center Drive, Orlando, FL. 32821

407-238-4200 WorldCenterMarriott.com

Complimentary Internet for Marriott Reward Members” [\(Sign Up Now\)](#)

“EVERYTHING UNDER ONE ROOF --- LARGEST MARRIOTT IN THE WORLD”

ROOM TYPE: (PLEASE CHECK) One Person Two People Three People Four People
 2 Doubles King

SPECIAL REQUEST: Handicap **NOTE: ALL handicap rooms only have One (1) King bed!**

ARRIVAL DATE: _____ **DEPARTURE DATE:** _____

PLEASE PRINT OR TYPE CLEARLY BELOW

NAME: _____ TITLE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: (____) _____ **E-Mail** _____

Names & Titles of additional room occupants: required because of 911 / Homeland Security

2. _____ 3. _____

4. _____

CREDIT CARD INFORMATION **Hotel will not accept reservation without a credit card guarantee**

CARD TYPE: VISA: _____ MASTERCARD: _____ AMEX: _____ DISCOVER: _____

CREDIT CARD NUMBER: _____ EXP. DATE: _____

NAME OF CARD HOLDER: _____

SIGNATURE: _____

PLEASE CHECK ONE: FLYING IN DRIVING CHARTER BUS TRAIN

Marriott Reward Member Number _____

Reservation request form MUST be signed in order to be processed by the hotel



TM



Please DO NOT write below line

of nights _____ (Office use only)