

## QUALITY INN LANCASTER

(formerly Ramada and Americas' Best Inn)

2250 Lincoln Highway East

Lancaster, PA 17602

Phone: 717-393-5499 FAX: 717-283-0362

For reservations Worldwide: 1-800-4CHOICE or gm.pa370@choicehotels.com

**Please mail this form directly to the address above. DO NOT MAIL TO QHC. Send only ONE reservation form per room.**

- Fill out only one form for each room required.
- Deposit for the first night's room rate plus 11% sales tax must accompany form to confirm reservations.
- Please make deposit check payable to: Quality Inn Lancaster or include major credit card information below.
- Hotel confirmation is required at check-in.
- Reservations not cancelled 72 hours prior to arrival will be charged for the first night's room fee and tax.

### CHECK TYPE OF ROOM REQUIRED:

\_\_\_ Single occupancy \$89.00

\_\_\_ Double occupancy- 2 Double Beds \$89.00

\_\_\_ Triple occupancy -2 Double beds \$89.00

\_\_\_ Quad occupancy- 2 Double beds \$89.00

\_\_\_ Will be sharing room. (The hotel cannot be responsible for assigning roommates. Unless roommate is stated, you will be assigned a single occupancy accommodation.)

Children ages 17 and under are FREE in parent's room (first two persons in room considered adults.)

There will be a \$10.00 charge, per day, for a roll-a-way bed.

Note: All rates are subject to 6 % Pa. State Tax, 3.9 % county tax and 1.1 % excise tax equaling a total of 11%.

Note: Guaranteed Reservations not cancelled 72 hours prior to the day of arrival will forfeit one night's deposit.

Room type is by request and every attempt will be made to accommodate your request.

Phone reservations accepted — be sure to identify yourself as part of Quilters' Heritage Celebration.

Check-in after 3 PM Check-out 11 AM

*Please print or type (black ink) the following information.*

Name: \_\_\_\_\_

No. of children: \_\_\_\_\_ Children's ages: \_\_\_\_\_

Roommates: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Business Telephone #: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

If credit card is to be used as a deposit: American Express      VISA      MasterCard      Diners Club

Card #: \_\_\_\_\_ Exp.: \_\_\_\_\_

Signature: \_\_\_\_\_

(Please sign name as it appears on the credit card.) \*Credit card will be charged upon receipt of reservation.

**RESERVE YOUR ROOM ONLINE: gm.pa370@choicehotels.com**