

North Carolina Society of the American College Of Osteopathic Family

NCS-ACOFB Booking ID # 72598

August 13, 2020 – August 16, 2020



We look forward to welcoming you to Pinehurst! Reservations will be accepted until July 22, 2020 or until the group block is full, whichever comes first. Pinehurst consists of a variety of accommodations including the Carolina, Villas, Holly Inn, The Manor Inn and Condominiums. The resort will make every effort to honor specific room requests. If your request is not available, the best substitution will be made.

DAILY RATES: European Plan LOCATION: HOLLY INN/ RESORT WIDE ACCOMMODATIONS

*Pinehurst may need to place the additional reservations requests in other lodging accommodations within the Resort should the number of group room reservations exceed what has been contracted for the LOCATIONS

GROUP RATE:

HOLLY INN:

Single or Double Occupancy: \$163.00 per room, per night. Please indicate the number of adults in the room:

RESORT WIDE:

Single or Double Occupancy: \$149.00 per room, per night. Please indicate the number of adults in the room:

Rates are per room, per night and include your accommodations.

Arrival Date

Departure Date

Check-In Time: 4:00 PM

Check-Out Time: 12:00 NOON

RESORT SERVICE FEE: A 10% resort service fee will be added to your account. STATE SALES TAX of 7% and occupancy tax of 3% are additional.

DEPOSIT AND CANCELLATION POLICY: A deposit representing one night's rate per person is charged at the time the reservation is made. Pinehurst must receive notice of any cancellation at least 30 days prior to date of arrival in order to refund a deposit.

Reservations may be made via email, phone, fax, or mail:

Email: Group.Reservations@pinehurst.com Toll-Free: (800) 487-4653 Fax: (910) 235-8240

Checks should be made payable to Pinehurst LLC and mailed to:

Pinehurst Resort (ATTN: Accounting)

P O Box 4000, Pinehurst NC 28374 - 4000

ROOMS TO BE OCCUPIED BY: (Type or Print all names)

Name Address City State Zip

Cell Phone Business Phone E-Mail

SHARING ROOM WITH:

Name Address City State Zip

Cell Phone Business Phone E-Mail

CREDIT CARD INFORMATION TO GUARANTEE RESERVATION:

Credit Card Number Expiration Date Security Code

Card Holder Name

Card Holder Authorized Signature:

This signature gives Pinehurst Resort permission to charge a deposit and/or balance to the credit card number provided

Is the Credit Card for both Guests? Yes or No (Please Circle)

Will the Guest have the credit card with them at check-in? Yes or No (Please Circle)

Is the Credit Card for final payment? Yes or No (Please Circle)

If Yes, will Incidentals be charged to this card? Yes or No (Please Circle)