

# HOLIDAY INN GRAND ISLAND RESORT

## ROOM RESERVATIONS

Reservations Must Be Made Directly

With Hotel [Print or Type]

Phone # [        ] \_\_\_\_\_ H

Name \_\_\_\_\_ Phone # [        ] \_\_\_\_\_ W

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

For arrival on \_\_\_\_\_ Depart on \_\_\_\_\_

Please Reserve \_\_\_\_\_ No. of Rooms for \_\_\_\_\_ People

Name[s] of person[s] sharing accommodations \_\_\_\_\_

Check/Money Order Enclosed     American Express     Discover     Visa

Carte Blanche

Master Card [Please include interbank # directly below card #]    Amount \$ \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

I understand that I am liable for one night's room and tax which will be deducted from my deposit, or billed through my credit card in the event that I do not arrive or cancel prior to the arrival date.

Signature \_\_\_\_\_

**International Ford  
Retractable Club**

**July 14-17, 2009**

**ABSOLUTE CUT-OFF:  
June 2, 2009**

**ROOMS**

\$89.00 + Tax

Add \$10.00 For

River Facing Rooms

*Smoking    Non-Smoking*

• **Hotel Number** •

**Ph: 1-716-773-1111**

**Fax: 1-716-773-1112**

**Toll Free: 1-877-472-6310**

• **Address** •

**100 Whitehaven Road**

**Grand Island, NY 14072**

**RESERVATIONS REQUESTED ARE SUBJECT TO AVAILABILITY. ROOMS MAY STILL BE AVAILABLE AFTER THE CUT-OFF DATE BUT NOT NECESSARILY AT THE GROUP RATE. PLEASE APPLY OCCUPANCY TAX TO THE ABOVE RATES. THESE RATES ARE AVAILABLE EITHER SIDE OF CONVENTION TIME.**