



**Turning Stone Resort & Casino**  
**Reservation Form**  
 Phone: 1-315-361-7711 or 1-800-771-7711  
[www.turningstone.com](http://www.turningstone.com)

**Group: Empire State Association of Assisted Living**  
**Date: Sunday, May 18, 2008, - Wednesday, May 21, 2008**

**Cut-off Date for Hotel Reservations is Thursday, April 17, 2008.**

**Full-American Plan Form: For Kosher and Non-Kosher Guests**  
**Includes overnight accommodations, full breakfast, lunch and dinner.**

**For overnight accommodations at ESAAL's 29<sup>th</sup> Annual Conference, please complete this form and mail or fax with deposit to:**

<b>Mail to:</b> Turning Stone Resort & Casino 5218 Patrick Road, Verona, NY 13478	<b>Or, Fax to:</b> 315-361-8500
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Reservation Information (Please print or type) Accommodations will be occupied by: Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Name(s): \_\_\_\_\_  
 Mr./Ms./Dr. \_\_\_\_\_

No. of Children: \_\_\_\_\_ Ages: \_\_\_\_\_ No. of Adults: \_\_\_\_\_

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

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

City, State, Zip: \_\_\_\_\_

Telephone, include area code and extension: \_\_\_\_\_

Fax, include area code: \_\_\_\_\_ Email: \_\_\_\_\_

List Roommate(s) if sending in separate reservation form(s): 1. \_\_\_\_\_ 2. \_\_\_\_\_

Room Rates: Inclusions – overnight room, three meals/day, taxes, gratuities & service charges	No. of Rooms	Room Type	Single/Night	Double Room/Person Per Night
<input type="checkbox"/> *Smoking Room <input type="checkbox"/> *Non-Smoking Room <small>*Based on availability</small>	_____	Tower Room	\$289	\$456/\$228pp
	_____	Lodge Room	\$438	\$605/\$302.50pp

**Please indicate if you require Kosher meals:**  Yes  No

**Deposit Policy:** All reservations must be secured with a deposit equal to the first night's room charge. The deposit will be applied to your designated length of stay.

**Please send a check, money order or indicate your credit card information below:**

Credit Card Company: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Account #: \_\_\_\_\_

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

\_\_\_\_\_  
 Please initial here if this card is not the attendee's and it is to be used for payment of the balance for this room reservation (excluding incidentals). If so, the full amount due will be charged at the time of the booking.

**Package Plan Cancellation Policy** A package plan reservation includes room and meal charges. To avoid a room and meal penalty, your cancellation notice **must be received four (4) days or more** prior to arrival. To avoid meal penalty, your cancellation notices must be received **four (4) days** prior to arrival. The entire package plan will be charged for cancellations received **48 hours or less.** 2/12/2008

Check-In Time: 3:00 p.m.  
 Check-Out Time: 11:00 a.m.