

Phone (970) 482-2626  
Fax (970) 224-9209



425 W Prospect Road  
Fort Collins, CO 80526

*2010 Colorado All State Orchestra*

HILTON FORT COLLINS WOULD LIKE TO OFFER THE FOLLOWING  
RATES FOR COLORADO ALL STATE ORCHESTRA!!

\$89.00/NIGHT FOR A STANDARD ROOM  
(UP TO FOUR PEOPLE IN A ROOM)

\$109.00/NIGHT FOR A DELUXE MOUNTAIN VIEW ROOM  
(UP TO FOUR PEOPLE IN A ROOM)

\*\*THESE DISCOUNTED RATES ARE AVAILABLE UNTIL THE ROOM BLOCK IS  
FILLED OR THE CUTOFF DATE OF JANUARY 14, 2010 IS REACHED.

THE HILTON IS LOCATED ACROSS THE STREET FROM THE CSU  
CAMPUS AND LESS THAN ONE MILE FROM OLD TOWN  
FORT COLLINS

FOR RESERVATIONS PLEASE COMPLETE AND EMAIL OR FAX  
BACK THE ATTACHED RESERVATION PACKET:

**Gail Arnett**  
**970-494-2947**  
**Fax 970-224-9209**  
[gail.arnett@iqh.com](mailto:gail.arnett@iqh.com)

**NOTE: Tax exempt status is only accepted if you are paying with a school check, purchase order, or school credit card. Tax exempt status is not allowed if you are paying with your personal credit card or cash.**

Phone (970) 482-2626  
Fax (970) 224-9209



425 W Prospect Road  
Fort Collins, CO 80526

**Hilton**  
**Fort Collins**  
Colorado All State Orchestra

***Hilton Fort Collins would like to Welcome Colorado All State Orchestra!***

\$ 89.00/night up to four persons, standard room      \$ 109.00/night up to four persons, king deluxe room

Please complete the information below:

On-site Advisor's Name: \_\_\_\_\_ School: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Estimated Time of Arrival: \_\_\_\_\_

(Check-in time is 3:00 p.m.)

Please designate below your choice of rooms:

<u>Qty</u>		<u>Qty</u>	
	1 person, 1 bed- \$89.00/night		1 person, 1 bed, king deluxe- \$109.00/night
	2 people, 1 bed- \$89.00/night		2 people, 1 bed, king deluxe- \$109.00/night
	2 people, 2 beds- \$89.00/night		3 people, 2 beds, king deluxe- \$109.00/night
	3 people, 2 beds- \$89.00/night		4 people, 2 beds, king deluxe- \$109.00/night
	4 people, 2 beds- \$89.00/night		1 bed, Handicapped Accessible- \$89.00/night

**CHECK-IN TIME: 3:00 P.M.**

**TAX EXEMPT STATUS**

*If you are tax exempt, please attach a copy of your Colorado Tax Exemption certificate.*

**NOTE:** Tax exempt status is **ONLY** allowed if you are paying with a school check, purchase order, or school credit card. Tax exempt status is **NOT** allowed if you are paying with your personal credit card or cash.

Enclosed is our school's tax exempt certificate.

**GUARANTEE**

**Credit card must be provided as guarantee:**

Card Type	Account Number	Exp. Date

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

**PAYMENT**

Enclosed is a school check in the amount of \$ \_\_\_\_\_

Enclosed is a purchase order in the amount of \$ \_\_\_\_\_

Please charge the above credit card in the amount of \$ \_\_\_\_\_

**RESERVATION DEADLINE: January 14, 2010-Rooms are available on a first come first serve basis and do sell out before the cutoff date.**

**CANCELLATION/CHANGE POLICY:** The room(s) will be held with a credit card for the reservation listed above. If the person holding the reservation does not check-in on the arrival date, the first night's room and tax will be charged to the above credit card. To avoid charges, please cancel/change your reservation(s) by January 14, 2010.



# Hilton Fort Collins

## 2010 Colorado All State Orchestra Rooming List

To facilitate registration, all students will be listed under their school name. Parents and other interested parties should ask for the advisor when trying to reach a student/child. Students are not allowed to charge to their rooms. *Add an additional page of rooms if needed.* Changes/cancellations may not be accepted after January 14, 2010.

	<u>First Name</u>	<u>Last Name</u>	<u>School</u>
<b>ROOM #1(ADVISOR)</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #2</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #3</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #4</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #5</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #6</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____
<b>ROOM #7</b>	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____
	4. _____	_____	_____

- Our school will check out of the hotel by 12:00 PM on our confirmed departure date.
- I will guarantee payment of the room charges (room service, movies, phone calls, etc.) incurred by the students and/or advisors from my school.
- I will agree to pay for any damages or theft related to the student's room.
- I will ensure that all students are in their rooms by 10:30 PM each evening.

\_\_\_\_\_  
Signature of Head Advisor/Teacher

\_\_\_\_\_  
Date

Phone (970) 482-2626  
Fax (970) 224-9209



425 W Prospect Road  
Fort Collins, CO 80526

**CODE OF CONDUCT POLICY**

**HILTON FORT COLLINS**

Hilton Fort Collins wants to ensure a quiet, restful stay for all of our guests. To accomplish this, we ask that all of our visiting schools and their chaperones show full respect and consideration for others. Please do not run or talk loudly in the hallways and please keep noise in the rooms to a minimum. We require that all students be in their individual assigned room or team rooms before 10:30 PM unless accompanied by a chaperone. We respectfully request that chaperones work together with Managers and Housekeepers to maintain proper order in the hotel. We request the group chaperones to accompany our hotel representative to ensure all students are in their rooms.

Our Manager on Duty and Executive Housekeeper reserve the right to inspect each occupied room before checkout. Any resulting damage(s) that may have occurred will be the responsibility of the school's advisor responsible for the student. Our hotel management will determine the amount of reimbursement.

The conduct of any student within the hotel facilities shall be in accordance with the policies outlined above. The hotel reserves the right to expel any person(s) violating any of the above mentioned policies.

\_\_\_\_\_  
Signature of Acceptance                      Title                      Date

\_\_\_\_\_  
Hotel Representative                      Title                      Date