

COLLEGE of CHARLESTON

RESIDENCE LIFE
AND HOUSING

Summer 2009 Housing Reservation Form

(Less than 5 guests)

May 11, 2009 – August 1, 2009

GENERAL INFORMATION

Full Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Work/Home #: _____ Fax #: _____ Cell #: _____

E-mail Address: _____

A reservation confirmation will be sent to this e-mail address

TRAVEL INFORMATION

Arrival Date/Time: _____ Departure Date/Time: _____

Group Type: Family (adults & youth) Adult(s) Teens/Youth

Expected number of guests: # _____ Male # _____ Female _____ **TOTAL**

Guest Names: _____

Reason for visiting the Charleston area: _____

HOUSING SPECIFICATIONS

Building Preference (see available buildings): (1) _____ (2) _____ (3) _____
(based on availability)

Room Type: # _____ Double Occupancy Rooms # _____ Single Occupancy Rooms

Special Housing Requests (Check all that apply):

Lower Floor Handicap Accessible Room Near Stairwell/Elevator

Other _____

AMENITIES

Linens: Yes No linens needed.

Full Package - \$20.00: How many? _____

Bath Package - \$10.00: How many? _____

Bed Package - \$15.00: How many? _____

Note: You will specify which rooms will require linens at a later date.

Telephones: Yes No

There is an additional one time charge per phone. (See rate sheet for costs.) Phones will be placed in room prior to arrival.

Fitness/Recreation Facilities: Yes* No

*If yes, the rates are as follows:

\$3 per person, per visit

\$75 per person for unlimited access for the duration of your stay

Parking: Yes * How many vehicles? _____ No

*If yes, please complete the parking request and return with this reservation form. Parking is NOT included in housing fees. Due to the College of Charleston construction and renovation projects, parking will be limited and granted on a first come first serve basis.

DEPOSITS

Deposits are required of all groups. The first deposit must be submitted to the Assistant Director for Summer Programs 30 days after receipt of the contract by the group contact/sponsor. All deposits will be credited toward the final bill. Deposits are as follows:

25% of Housing Cost	Due 30 days with contract
50% of Housing Cost	Due 30 days prior to arrival (<i>after bed guarantee is submitted</i>)

The remaining balance of all housing costs and amenities will be due 30 days after the group checks out.

*Reservations submitted less than 30 days prior to arrival must submit full payment at time of reservation.

BILLING INFORMATION

A final invoice will be sent to the name and address on the front of this reservation within one week of departure. Payment by IDT, Check, Money Order, or Cash is due within 30 days of the final invoice. Failure to pay within 30 days will result in a 15% late fee. (*Details in contract*)

Do you require separate billing invoices? Yes* No

*If yes, please mark all that apply. Housing Meals/Catering Parking Meeting Space

CANCELLATION POLICY

This policy will be in effect when the official Housing Contract is signed. The policy states:

An individual may cancel the request for housing if done in writing 90 days prior to the individual's arrival date. The Housing Contract then becomes null and void. If an individual cancels between the specified number of days prior to the arrival date, the individual will be charged according to the policy listed below.

<i>Cancellation is received within 90 – 61 days</i>	<i>15% of deposit will be refunded</i>
<i>Cancellation is received within 60 – 30 days</i>	<i>25% deposit is non-refundable</i>
<i>Cancellation is received within 29 – 15 days</i>	<i>Responsible for 50% of contracted housing</i>
<i>Cancellation is received within 14 – arrival</i>	<i>Full payment required</i>

Additional comments/needs/interests: _____

By signing below, I understand that this is only a request for housing on the College of Charleston campus. The housing reservation is only guaranteed after the signed contract is received.

Signature: _____ Date: _____

Please return your reservation and parking requests by one of the following:

Mail: College of Charleston
Residence Life and Housing
Attn: Summer Programs
40 Coming Street
Charleston, SC 29401

Fax: Attn: Summer Programs
843.953.6590

E-mail: ResLifeSummerPrograms@cofc.edu
Subject: Reservation