

# SEBIO

**Tuesday, November 6, 2007- Thursday, November 8, 2007**  
**RESERVATION FORM**

We look forward to welcoming you to Pinehurst! Please take a moment to fill out this reservation form to ensure your accommodations for your upcoming visit.

Pinehurst requires that your reservation request form be completed and returned on or before **Sunday, October 7, 2007 EST**. Reservation forms received after this date will be processed on a "space-available basis". The Pinehurst Resort consists of a variety of lodging accommodations including the Carolina, Villas, Holly Inn, The Manor, 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: Modified American Plan**

**LOCATION: Resort Accommodations**

SINGLE OCCUPANCY: \_\_\_\_\_ \$250.00 per night      DOUBLE OCCUPANCY: \_\_\_\_\_ \$170.00 per person, per night

Rates are per room, per night and include lodging, breakfast and dinner.\*

\*Please note that dinner on Thursday, November 7, 2007 will be in the form of the Gala Reception at The Donald Ross Grill

**ROOM PREFERENCE** (based on availability)      \_\_\_\_\_ Non-smoking      \_\_\_\_\_ Smoking

Arrival Date \_\_\_\_\_      Departure Date \_\_\_\_\_

**Check-In Time: 4:00 PM      -      Check-Out Time: 12:00 NOON**

**RESORT SERVICE FEE & STATE SALES TAX:** Rates are subject to 10% resort service fee, 6.5% state sales tax and 3% occupancy tax. Covered in the Resort Service Fee are the following amenities and services: unlimited use of the Fitness Center, Outdoor Pools, Tennis Courts, Bicycles, Beach Club, Practice Putting Greens, Pitching Areas, Driving Range, Afternoon Tea in the Carolina, On-call Transportation.

**DEPOSIT AND CANCELLATION POLICY:** A deposit representing one night's rate per person is charged at the time the reservation is made. The cancellation deadline is **Sunday, October 7, 2007 by 5:00pm.**

**Please complete and fax or mail with deposit to:**

FAX: 910-235-8240

PHONE: 800-487-4653, Press Option 2

**GROUP RESERVATIONS**

**PINEHURST**

**PO BOX 4000**

**PINEHURST, NC 28374-4000**

**ROOMS TO BE OCCUPIED BY:** (Type or Print)

**(ALL GUESTS WILL BE CHARGED A ONE-NIGHT ROOM DEPOSIT)**

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

**CREDIT CARD INFORMATION FOR ROOM DEPOSIT(S):**

Credit Card Name & Number \_\_\_\_\_ **EXP** / \_\_\_\_\_

Card Holder Name \_\_\_\_\_

**Credit Card Holder Authorized Signature:**

**\*\*\*ASSOCIATE MEMBERS\*\*\*** Please complete so we may recognize all of our Associate Members.

CLUB AFFILIATION: \_\_\_\_\_ MEMBER NO: \_\_\_\_\_