

Mountain Laurel Resort - 81 Tree Tops Drive, White Haven, PA 18661

**HOTEL RESERVATION FORM**

Smiling David's Dance School - SMILING DAVID DANCE Extravaganza – Escape to the Poconos  
\*TWO NIGHT MINIMUM\*

**Friday, April 17, 2020 through Monday, April 20, 2020**

PLEASE SEND FORM AND PAYMENT TO

Email [sdescape4@gmail.com](mailto:sdescape4@gmail.com)

QUESTIONS PLEASE CALL: 1-973-489-3321

Use this form to make hotel reservations with Split Rock Resort. **Reservation with payment equal to one night's stay.** If the rooms being held for event are not reserved by the cut-off date of **March 1, 2020**, they will be released back into hotel inventory for resale. Reservations after the cut off date are made through the resort reservations office on a space available basis at prevailing non-group rates. Cancellation on or after **March 29, 2020** - deposit is **non-refundable**, on or after **April 5, 2020**, cancellation is full room, tax and fees of reservation.

**\*Personal checks will NOT be accepted for payment at check-in\***

**ACCOMMODATIONS (Please choose room type)**

\_\_\_ \$133.42 Standard Room (Two Double Beds, One Bathroom)

**SOLD OUT**

\_\_\_ \$133.42 Condo (Gally Kitchen, One Bathroom and Murphy Bed)

\_\_\_ \$175.00 One Bedroom (Kitchen, Two Bathrooms, Livingroom with Pullout Sofa Bed and Private Bedroom with Two Double Beds)

**SOLD OUT**

\_\_\_ \$175.00 Suite (Kitchen, Two Bathrooms, Livingroom with Pullout Sofa Bed, Private Bedroom with One King Bed and 2nd Private Bedroom with Two Double Beds)

*\*Please note that due to contracted agreement, the above rooms will be the only rooms we offer to Smiling David Dance School\**

\*\*\*Rates quoted are **Per Room, Per Night** and are inclusive of 6% state sales tax, 3% county occupancy tax and 17% Resort fee\*\*\*

**Package includes: Accommodations Only.**

GUEST NAME \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_

ADDITIONAL GUESTS (PLEASE INCLUDE ALL AGES OF CHILDREN STAYING IN ROOM)

\_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

(FOR CONFIRMATION ONLY) (AUTHORIZED CHARGE EQUAL TO ONE NIGHTS STAY)

NAME ON CARD \_\_\_\_\_

CARD # \_\_\_\_\_

EXP DATE \_\_\_\_\_ SECURITY CODE(BACK OF CARD) \_\_\_\_\_

SIGNATURE \_\_\_\_\_