



THE HOTEL  
ITHACA

## New York State Association of Tax

### Receivers & Collectors

### VENDORS/COMMUTERS

I, \_\_\_\_\_ authorize The Hotel Ithaca to charge the following credit card for the reservation of \_\_\_\_\_ during the NYS Association of Tax Receivers & Collectors stay from June \_\_\_\_, 2023 until June \_\_\_\_, 2023. *Vendors Nightly Rate of \$139.00+*

Signature of Card Holder: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Authorized Charges (please circle one): Room Only Charges Meal Charges

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Welcome Reception - \$14.26         | <input type="checkbox"/> Monday Breakfast & Break - \$22.06 | <input type="checkbox"/> Monday Lunch & Break - \$29.56 |
| <input type="checkbox"/> Tuesday Breakfast & Break - \$22.06 | <input type="checkbox"/> Tuesday Lunch & Break - \$29.56    | <input type="checkbox"/> Tuesday Dinner - \$33.57       |
|  | <input type="checkbox"/> Wednesday Breakfast - \$16.94      |   |

Please (x) your meal selection(s) above. Prices include 20% service charge and 8% Sales Tax.

I understand that the credit card provided will be charged for tax unless a tax-exempt form has been provided for the reservation. TAX EXEMPT FORM MUST ACCOMPANY THIS REGISTRATION FORM WHEN SUBMITTED. Additionally, I understand that the charges will be processed on the day of arrival and an additional card, unless this card is authorized, will be taken for any incidental charges incurred during the guest's stay.

All forms must be received by May 15, 2023 for guarantee of reservation and meals. Cancellations within 10 days of arrival will incur a late cancellation charge. Please email this form to [mrector@harthotels.com](mailto:mrector@harthotels.com) or fax to 607-269-0406. If using USPS, please mail to the address below with the Attention To: Mari Rector.

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_

Signature of Card Holder: \_\_\_\_\_