School Nutrition Association of North Carolina
2022 SNA-NC Industry Seminar Booking ID # 92959
February 20, 2022 – February 22, 2022

We look forward to welcoming you to Pinehurst! Reservations will be accepted until January 21, 2022 or until the group block is full, whichever comes first. Pinehurst consists of a variety of accommodations including the Carolina, Villas, Holly Inn, The Manor Inn 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: European Plan **LOCATION:** CAROLINA HOTEL
*Should the number of group room reservations exceed what has been contracted for the Carolina, Pinehurst may need to place the additional reservations requests in other lodging accommodations within the Resort

GROUP RATE:
Please indicate the number of adults in the room: _____$153.00 per room, per night
Rates are per room, per night and include your accommodations and **Resort Service Fee**.

Arrival Date _____ Departure Date _____

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

STATE SALES TAX: State sales tax of 7% and occupancy tax of 3% are additional.

DEPOSIT AND CANCELLATION POLICY: A deposit representing one night's rate per person is charged at the time the reservation is made. Pinehurst must receive notice of any cancellation at least **30 days** prior to date of arrival in order to refund a deposit.

Reservations may be made via email, phone, fax, or mail:
Email: Group.Reservations@pinehurst.com **Toll-Free**: (855) 737-6423 **Fax**: (910) 235-8240

Checks should be made payable to Pinehurst LLC and mailed to:
Pinehurst Resort (ATTN: Accounting)
P O Box 4000, Pinehurst NC 28374 - 4000

ROOMS TO BE OCCUPIED BY: (Type or Print all names)

_____
Name Address City State Zip

Cell Phone (_____) _____ Business Phone (_____) _____ E-Mail _____

SHARING ROOM WITH:

_____
Name Address City State Zip

Cell Phone (_____) _____ Business Phone (_____) _____ E-Mail _____

CREDIT CARD INFORMATION TO GUARANTEE RESERVATION:

Credit Card Number_____Expiration Date_____/_____ Security Code_____

Card Holder Name _____

Card Holder Authorized Signature: _____
This signature gives Pinehurst Resort permission to charge a deposit and/or balance to the credit card number provided

Is the Credit Card for both Guests? Yes or No (Please Circle)
Will the Guest have the credit card with them at check-in? Yes or No (Please Circle)
Is the Credit Card for final payment? Yes or No (Please Circle)
If Yes, will Incidentals be charged to this card? Yes or No (Please Circle)