



FRATERNAL ORDER OF EAGLES

2018

HOSPITALITY ROOM REQUEST

DISTRICT/AERIE # _____

DATES OF OCCUPANCY: ARRIVAL: _____ DEPARTURE: _____

RESPONSIBLE PERSON: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____ EMAIL ADDRESS: _____

HOSPITALITY ROOM: \$150.00 PER NIGHT

Payment in full must be received with reservation form to confirm room unless other arrangements are made with the State Secretary. **Limited number of Hospitality Rooms available. First come-first served basis**
Check or Money Order made payable to: **Pa. State Aerie F.O.E.**

We are unable to accept credit cards.

COMMENTS OR ADDITIONAL REQUESTS:

EVERY ATTEMPT WILL BE MADE TO ACCOMODATE YOUR REQUEST PENDING HOTEL REQUIREMENTS. STATE AERIE WILL DO HOSPITALITY ROOM ASSIGNMENTS & YOU WILL RECEIVE NOTIFICATION.

YOU WILL BE RESPONSIBLE FOR ANY DAMAGES TO YOUR HOSPITALITY ROOM!!!!!!!

I ALSO UNDERSTAND ALL HOSPITALITY ROOMS MUST BE CLOSED BY MIDNIGHT !!!!!

X _____

Signature of Responsible Person

PLEASE SEND COMPLETED REQUEST FORM TO:

DWAIN SHUPE

PA. STATE SECRETARY

P.O. BOX 799

LATROBE, PA. 15650

EMAIL: pastaerie@windstream.net

FAX: 724-879-4252