

Please print this form, complete in its entirety, and mail to The Shamrock House along with a \$75 per person



Reservation Form
Shamrock House, P.O. Box 159
East Durham, NY 12423
(518) 634-2897

Name	
Address	
()	()
Home Phone Number	Work Phone Number

Names of Others in Your Party:

Accommodations:

<u>Category A:</u> Large Motels & Greenleaf Deluxe	<u>Category B:</u> Small Motels
<u>Category C:</u> Greenleaf Boarding House	

1st Choice: _____ # of Rooms: _____ # of People per room: _____

2nd Choice: _____ # of Rooms: _____ # of People per room: _____

Special Requests: (Cribs, Cots, etc.) _____

Day & Date of Arrival: _____ / _____ / _____

Day & Date of Departure: _____ / _____ / _____

Please make all checks payable to:
THE SHAMROCK HOUSE

<u>Deposit Information- Please Check One:</u>			
(\$75 per person deposit required)			
_____	Check or Money Order	Amount	\$ _____
or			
_____	Credit Card	Amount	\$ _____
<small>Visa, Master Card, Discover, American Express</small>			
Card # _____	Exp. Date: _____		