



World Beef Expo Dorm Room Reservation Form
 Rooms are available in the Tommy G. Thompson Youth Center September 26-29, 2018

Room Rates:

- \$90.00 PER NIGHT Plus Tax (\$103.59) Maximum of 6 people per room. Guests 17 and younger must be accompanied by a parent or guardian.
- The 1st night of your stay will be charged when making your reservation.
- Acceptable methods of payment for the balance due are: cash, money order or credit card.

Linen Packages:

Room Rentals DO NOT include bedding. Linen packages may be ordered in advance when you place your reservation.

- \$15.00 Premium Linen packages include: two (2) flat sheets, three (3) bath towels, three (3) washcloths, one (1) pillow case, one (1) pillow and one (1) blanket.
- \$10.00 Standard Linen packages include: two (2) flat sheets, three (3) bath towels, three (3) washcloths and one (1) pillow case.
- These rental items should not be removed from the room during your stay or after your departure.

Reservation/Linen Package Cut-Off: Reservations will be due by: **Tuesday, September 18, 2018.**

*Reservations received after the cut off date will be subject to a one time late fee as follows: \$20.00.

*All reservations and linen package requests received after the cut off date will be accommodated based on availability.

Food Policy:

Food may not be cooked or heated up on any electric device (please see Dormitory Room Policies).

Cancellation Policy:

One night will be charged as a cancellation fee.

Parking Rates:

Parking fee will be paid at the gate upon entry to the Fair Park.

RESERVATIONS ARE NOT SECURED WITHOUT A WRITTEN OR EMAILED WISCONSIN STATE FAIR PARK CONFIRMATION, WHICH WILL BE SENT AFTER ALL NECESSARY ITEMS ARE RECEIVED.

PLEASE FILL OUT THE BELOW INFORMATION AND SEND IT TO: dormreservations@wistatefair.com

NAME OF GUEST MAKING RESERVATION: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

BILLING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DAYTIME PHONE: _____ EMAIL ADDRESS: _____
(Reservation confirmation will be sent to this address)

NAMES OF GUESTS IN THE ROOM (maximum of 6):

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Nights Lodging Needed: Wed. 9/26 ____ Thurs. 9/27 ____ Fri. 9/28 ____ Sat. 9/29 ____

Total Nights ____ X \$103.59 = \$ ____ + # ____ Standard linen packages X \$10.00 = \$ ____ + # ____ Premium linen packages X \$15.00 = \$ ____ + late fee (20.00) = \$ ____ = TOTAL DUE \$ ____

By signing below, I acknowledge acceptance and adherence to the Dormitory Room Rules at Wisconsin State Fair Park and as a guest, agree to protect, indemnify and save the State of Wisconsin, the Wisconsin State Fair Park Director, and their agents and employees harmless from and against any and all claims, and against any and all loss, cost, damage or expense, including without limitation reasonable attorneys' fees, arising out of any negligent acts or intentional misconduct of the guest, its invitees or agents, which causes or is alleged to have caused injury to persons or property, including but not limited to intellectual property.

Signature _____ **Date** _____

A representative will call you to complete the reservation. Please provide the following information so we can contact you:

Phone number _____ Best time to call M-F: ____AM (8am-Noon) ____PM (Noon-4pm)

Please note, the 1st night will be charged when you are contacted and a photo ID and a credit card must be presented at check-in by all guests (ages 18 and above). Three attempts will be made to reach you to complete the reservation. After 3 attempts to reach you, this reservation request will be deleted.