



HOTEL RESERVATIONS FORM
NATIONAL COMMANDER'S VISIT - GEORGIA
FEB 21, 2021 - FEB 26, 2021

Guest Information:

Name: _____

Address: _____

City / State / Zip: _____

Phone: _____ E-mail: _____

Payment Information:

Doubletree Hilton (one-night deposit of \$144.00). Exact Dates TBD

Hampton Inn (one-night deposit of \$105.00). Exact Dates TBD

Guarantee by credit card: Visa MasterCard Amex Other

Card Number: _____ Expiration Date: _____ MO/YR

(Credit card will not be billed until you have checked in; however, if you must cancel your reservation, you must personally contact the hotel within 72 hours of check-in or you will be charged).

If paying by check, enclosed it and make it payable to the Hotel)

Hotel Information: The Doubletree Hilton and Hampton Inn Hotels are NON-SMOKING HOTELS!

Arrival Date: _____ Departure Date: _____ Number of People in Room: _____

Please Check One: King (one bed)
 Double (two beds)

Do you require a handicap accessible room? _____ Yes _____ No

Name(s) of other(s) sharing room: _____

Please complete this form in full and return to: The American Legion, Department of Georgia
3035 Mt. Zion Road, Stockbridge, GA 30281

DEADLINE: January 22, 2021 **FAX: 678.289.8885**