Temple University Room Reservation Request
(To be used when charges are to be paid by Temple University)
Rates in effect September 1, 2016 until June 30, 2018

Arrival Date ___________ Departure Date _______________ Estimated Arrival Time ___________

AR Account # _______________ Standard Guestroom Rates: $164.00 Single/Double Occupancy

Temple University Billing information
Print Name ______________________

Fund _______ Org _______ Acct _______ Program _______

Authorize Signer _____________________

Direct Bill: Room and Tax Room, Tax and Parking Room, Tax and Meals All Charges
(Circle all that apply)

Business Purpose: ________________________________________________________________

Temple Department Name: _______________________________________________________

Guest Name_________________________ Guest Email______________________________ Telephone Number____________________

Company________________________ Street Address________________________ City__________ State _______ Zip __________

Reservation Made By:

Name__________________________ Department/Company ______________ Telephone Number____________________

Street Name________________________ City__________ State _______ Zip __________

Return fax number:_________________________ and/or email__________________________

Reservation Accepted By:

__________________________ ___________________________ ___________________
By ____________________ Confirmation # __________ Date ____________

If the above requested room is available, your confirmation will be returned via facsimile before the end of the next business
day, Eastern Time. If you have not received a confirmation or a denial, please call Katie Casciotti (215) 521-6549 or email
katie.casciotti@hiltonpennslanding.com

PLEASE MAKE SURE THIS FORM IS SIGNED BY AN AUTHORIZED SIGNER FOR THE FUND ABOVE

- Cancellation
- Revision
- New Reservation