



AFFORDABLE
I N N S

Reservation Request

Date of Request	
Reservation Dates	
Name of Guest	
# of Adults in Room	
# of Children in Room	
Phone Number	
Email Address	
Billing Address	
Room Type Required	
Credit Card Type (Visa/Master/Amex/ etc.)	
Credit Card Number	
Expiration Date	

Employee Name	
Room # Assigned	
Room Rate	
Confirmation Number	
Guaranteed in System (yes or no)	