

**RESERVATION FORM**

**PLEASE FILL OUT THIS FORM AND FAX BACK TO THE TIDES MOTOR INN (516) 671-7076  
YOU WILL BE NOTIFIED WITHIN 24 HOURS VIA FAX OR TELEPHONE.  
THANK YOU FOR YOUR RESERVATION!**

**GUEST INFORMATION**

DATE OF ARRIVAL: \_\_\_\_\_

NUMBER OF NIGHTS: \_\_\_\_\_

GUESTS NAME: \_\_\_\_\_

COMPANY NAME (IF ANY): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE AND ZIP CODE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

DAYTIME TELEPHONE NUMBER: \_\_\_\_\_

EVENING TELEPHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

**TYPE OF ROOM**

- SINGLE (1 DOUBLE BED)
- DOUBLE (2 DOUBLE BEDS)
- POOLSIDE (1 QUEEN BED)
- KITCHENETTE

ENTER NUMBER OF GUESTS: \_\_\_\_\_

**METHOD OF PAYMENT**

- CASH       VISA       MASTERCARD       AMERICAN EXPRESS DISCOVER

**ADDITIONAL NEEDS**

- ROLLAWAY BED
- CRIB
- NON SMOKING ROOM

**SPECIAL REQUIREMENTS, REQUESTS, OR INSTRUCTIONS**

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