



200 Brown Street
West Lafayette, IN 47906

Thank you, for choosing Campus Inn of West Lafayette, IN. We are located two blocks from Purdue University and within walking distance to many restaurants, Movie Theater, cafes, sports bars and much more. We, the staff, are pleased with your decision and look forward to serving you.

1. All the reservations must be guaranteed with a valid credit card.
2. You must make your reservation for a minimum of two consecutive nights, consisting both Friday and Saturday night. (Minimum 2 nights stay required)
3. Cancellations must be made 2 pm local hotel time, 14 days prior to the scheduled arrival date. Obtain cancellation number. Failure to do so will result in your credit card getting charged for both nights in the full amount. (No exceptions)
4. There are no discounts available for any football game weekends & No refunds for early checkout.
5. Security deposit \$ 150.00 will be charged at check in on top of the room charge.
6. Reservations are non transferable in any way or form after the cancellation deadline.
7. Pre-authorization will be taken 2 weeks before schedule arrival date. Declined credit card will result of losing the reservation without any prior notice to the guests.
8. From the receipt of this signed contract, the confirmation will be sent within 48 hrs by email.
9. Rates do not include taxes. Rates are set for up to 2 People for one bed & 4 people for 2 beds.
10. Only 1 vehicle/room will be allowed to park in the hotel's parking lot. All guests are requested to obtain their parking pass at check in. No additional vehicle will be allowed to park in the premises.
11. Campus Inn does not guarantee any rooms if this signed contract is not received.
12. No guarantee of specific room number at reservation. Management reserves the right to allot the room number on the day of schedule arrival.
13. No pets will be allowed during any home game weekends.

Reservation Information

By signing this contract will be understood that you have read the policy and agreed.

Arrival Date:	Type of Room:	# of Rooms:
Departure Date:	Number of Adults:	
Last Name:	First Name:	
Address:	City:	
State:	Zip:	
Phone:	Cell:	
E-mail:	Rate per night: \$ _____ + 12% tax	
CC Type:	CC Number:	
CC Holder Name:	CC Expiration:	
CC Holder Signature:	Date sent:	
Comment :		

**Thank you very much for your business.
We will do our best to accommodate your needs. We look forward to serving you.**