

# **HUNTINGDON HIDEAWAY**

8774 Riverview Heights Road, Huntingdon PA 16652

Telephone 724-349-6268 Email [jim@huntingdonhideaway.net](mailto:jim@huntingdonhideaway.net)

Fill out and E mail to [jim@huntingdonhideaway.net](mailto:jim@huntingdonhideaway.net) you will receive a confirmation and agreement that need to be signed and returned with your deposit check. The balance will be due prior to check in.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Dates Requested 1:** \_\_\_\_\_ to \_\_\_\_\_

**Dates Requested 2:** \_\_\_\_\_ to \_\_\_\_\_

**Dates Requested 3:** \_\_\_\_\_ to \_\_\_\_\_

**Check-in Date 1:** \_\_\_\_\_ after **3 pm EST** (No early check-in please)

**Check-out Date 1:** \_\_\_\_\_ by **11 am EST**

Number of adults: \_\_\_\_ Number of children: \_\_\_\_ Pets: \_\_\_\_

**Check-in Date 2:** \_\_\_\_\_ after **3 pm EST** (No early check-in please)

**Check-out Date 2:** \_\_\_\_\_ by **11 am EST**

Number of adults: \_\_\_\_ Number of children: \_\_\_\_ Pets: \_\_\_\_

**Check-in Date 3:** \_\_\_\_\_ after **3 pm EST** (No early check-in please)

**Check-out Date 3:** \_\_\_\_\_ by **11 am EST**

Number of adults: \_\_\_\_ Number of children: \_\_\_\_ Pets: \_\_\_\_

**Mail Reservation Request to:**

**James Swope  
39 Stonegate Road  
Indiana, Pennsylvania 15701**