



Friends and Family Discount Authorization Form

According to company policy, this form entitles the below named individual to receive the Friends and Family rate discount on a space available basis for a maximum of two rooms per night, two houseboats per day and/or for activities at participating ARAMARK Parks and Destinations locations. These discounted rates are for personal travel only.

Terms & Conditions of the Friends and Family Rate Room Discount Program

1. Falsification or other misrepresentations of information on this Authorization Form will constitute grounds for immediate termination of the employee's employment.
2. This original Authorization Form must be presented and surrendered at the front desk at the time of check-in and may not be used by anyone other than the authorized individual. A separate form must be completed for each property visited.
3. Photo identification and this Authorization Form are required at the time of check-in.
4. Credit must be established at the time of check-in.
5. ARAMARK Employees friends and family will receive the Friends and Family room rate for personal travel only (not business).
6. Use of the friends and family room rate discount is a privilege. Your conduct and professionalism (as well as those persons in your party) as a guest is a representation of ARAMARK. Any inappropriate conduct or behavior as a guest at a participating location will be dealt with as misconduct in connection with the employee's employment. Any conduct or behavior deemed inappropriate by the management of the location where you are a guest could result in the employee receiving disciplinary action, loss of room discount privileges, written warning and possible termination of employment.
7. The authorization form expires 60 days after the issue date or when the employee is no longer employed by ARAMARK.

By requesting this room discount benefit, I accept and agree to abide by the terms and conditions outlined above.

Name of Employee

Employee Number/ID

Name of Friend or Family Member

Issued by:

Name of General Manager

General Manager's Signature

Business Unit/Location

General Manager's eMail Address

Issue Date: _____