

RESERVATION REQUEST
WELCOME TO BARKSDALE INN
"THE HOME OF SOUTHERN HOSPITALITY"

Is this request for ___leisure travel ___official travel? (Check one)

Arrival:_____Departure:_____#Adults: _____#Children:_____

of Rooms: _____ Rank:_____ Gender:_____

Purpose of visit/ Unit: _____

Name: _____

Phone: _____

Address: _____

City St Zip: _____

E-mail: _____

Method of payment (Check one)

___VS ___MC

CC#: _____

Exp Date: _____

Name as it appears on card: _____

SPECIAL NEEDS REQUEST: _____

If you wish to fax your request, please use 318-456-2267 or DSN 781-2267