

TAU HOUSE

2401 PIEDMONT AVENUE
BERKELEY, CALIFORNIA 94704
manager@tauhouse.cnchost.com

TEL: 510-848-0679
FAX: 510-528-5167
www.tauhouse.com

2011 UC BERKELEY SUMMER & OTHER INTERNATIONAL SUMMER SESSIONS RATES

The fees include room, linens, cleaning services for common areas (hallways, bathrooms, living room, study and recreation areas), 18 meals per week, and social activities. Computers and wireless internet service available.

Sessions & Dates	Triple Occupancy	Double Occupancy	Single Occupancy
UC Session A (May 23 – July 01)			
All Other 6 Week Summer Sessions	\$1,675	\$1,950	\$2,600
UC Sessions A & D (May23–August 12)			
All Other 12 Week Summer Sessions	\$2,900	\$3,325	\$4,600
UC Session B (June 06 – August 12)			
All Other 10 Week Summer Sessions	\$2,375	\$2,775	\$3,500
UC Session C (June 20– August 12)			
All other 8 Week Summer Sessions	\$1,975	\$2,275	\$3,100
UC Session D (July 5- August 12)			
All Other 6 Week Summer Sessions	\$1,675	\$1,950	\$2,600
UC Session E (July 25 - August 12)			
All Other 3 Week Summer Sessions	\$1,125	\$1,350	\$1,650
2 Week Summer Session	\$ 750	\$ 900	\$1,100

Note: In addition to the above fees, we require a \$200 refundable deposit. Your \$200 deposit is not refundable if you cancel your reservation less than 4 weeks before the start of your session.

Check-out time is at 7:00 PM on the last day of the session.

If you have questions about Tau House for other local accredited school's summer classes or programs, please email manager@tauhouse.com

SUMMER APPLICATION FORM

Last Name: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Country: _____

TEL: _____ Mobile: _____ FAX: _____

EMAIL: _____

Sex: Male Female **Date of Birth:** _____

Room Choice: Triple Double Single

SESSION DATES:

- SESSION A (MAY 23 - JULY 02, 2011)
- SESSION A & D (MAY 23 - AUGUST 12, 2011)
- SESSION B (JUNE 06 - AUGUST 12, 2011)
- SESSION C (JUNE 20 - AUGUST 12, 2011)
- SESSION D (JULY 05 - AUGUST 12, 2011)
- SESSION E (JULY 25 - AUGUST 12, 2011)

OTHER _____ Dates: _____

School: _____

Arrival Date: _____ **Departure Date*:** _____

*Check-out time is 7:00 PM on the last day of the Summer School Session.
Students may arrive 2 days prior to the start date of their session at no extra cost.

In the space below or on another sheet of paper, write a few sentences about yourself and your interests.

Instructions: Return the completed application form and \$200 deposit. Tau house accepts Visa & MasterCard, travelers checks, cash & checks drawn on US banks If paying by check, make check payable to Tau House. You may mail the application form and check to Alpha Epsilon Phi ; Attention: Ann Bettelheim; PMB 194; 1563 Solano Ave; Berkeley, CA 94707-2116 USA

If paying by credit card: mail, fax 1-510-528-5167 or email manager@tauhouse.com the necessary information (see Payment Methods Page)

Payment Form for Tau House:

If you wish to pay for Tau House do **NOT** send the application fee or payments to the University of California or any other school you might be attending. Please make your payment by travelers' checks, cash, credit card, International money order or by a check drawn on a U.S. Bank.

1. Payment by Check

Checks should be made out to: **Tau House or Ann Bettelheim**

Mail Checks to:

**Ann Bettelheim
PMB #194
1563 Solano Avenue,
Berkeley, Ca 94707 - 2116**

2. Payment by credit card (Visa or Master Card only)

you may fax the completed form to (510) 528-5167 or mail the form to the address listed above for mailing checks.

Student's Name: _____ **Session**
Dates: _____

Amount to be charged to credit card \$ _____
 Master Card Visa

Credit Card Number: _____ Expiration Date: _____

Card Verification No: _____ (final 3 digits printed on back of card)

Card Holder's Name: _____

Card Holders Address: _____

Number Street

City State Country zip

Card Holder's Signature: _____ Date: _____

Card Holder's Phone Number: _____ Email: _____

I understand that any remaining unpaid balance or subsequent charges (i.e. lost keys, damages, remaining house charges, guest meal charges, fines and termination fees) will be charged to this credit cards. I hereby authorize the use of the credit card number entered above to cover outstanding money owed.

Cardholder Signature: _____ Date: _____