HOTEL INFORMATION FORM

This form is required for all teams that stay overnight

(Please include everyone that is traveling with the team – parents, grandparents, relatives, etc. rooms)

Team Name		Age Group
Hotel Name		
Address		
Date Check-In	Date Check-Out	Number of rooms
HOTEL ROOM RATE PE	ER DAY	
Was the reservation sta	off courteous to you when making your	r reservations?YN
Comments:		· · · · · · · · · · · · · · · · · · ·
	who is staying in the hotel	

Please mail or bring this form with you. Remember to include everyone in the number of rooms count. (Parents, Grandparents, other relatives and friends).