

BULLETIN NO. 1

March 18, 2016



Form B: Hotel Room Accommodation Form

Organization:	
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Reservation

Hotel	
Number of single rooms:	
Number of double rooms:	
Number of triple rooms:	
Check In Date:	
Check Out Date:	
Rate:	

Room Accommodation Name of Guest(s)

Check In Date	Room Number 1
	Guest 1
Check Out Date	Guest 2
	Extra Bed

Check In Date	Room Number 2
	Guest 1
Check Out Date	Guest 2
	Extra Bed

Check In Date	Room Number 3
	Guest 1
Check Out Date	Guest 2
	Extra Bed

Check In Date	Room Number 4
	Guest 1
Check Out Date	Guest 2
	Extra Bed

Please submit on or before September 15, 2016.