

2019 Summer Conference Final Guarantee

Organization Name:			
Title of Conference/Pr	ogram ("Progra	am"):	
Program Start Date:		Program End Date:	
Contact:		Telephone:	Email:
		FOR CONFERENCE CONTACT TO CO	OMPLETE
Lodging			Activity Center Access
Assigned Facility:			Dates:
Double Occupancy:	Males	Females	No. of People:
Single Occupancy:	Males	Females	Parking Passes
No. Pillow Linen Packages:		- Cinaios	Dates:
No. Replacement Linen Packages:			No. of People:
Comments/Special Rec (curfew, gender separa	quests ation, etc.):		
Check In Time:		Check Out Time:	
Meals			
Breakfast Dates:		Lunch Dates:	Dinner Dates:
No. of People:		No. of People:	No. of People:
Signature:		Date: FOR CONFERENCE SERVICE USE ONLY	
		FOR CONFERENCE SERVICE USE	SUNLY
ID Cards Order:			
Facility Access:		No. of AC Access:	Curfew:
No. of Breakfasts:		No. of Lunches:	No. of Dinners:
Comments:			
Cost:		Prepared by ID Card Services:	Received by Conference Services:
Parking Passes Order:			
Cost:		Prepared by Parking:	Received by Conference Services: