

HOTEL ROOMING LIST



GROUP NAME: _____

INSTRUCTIONS:

Please **TYPE** or **CLEARLY HANDWRITE** the First & Last Name of each person staying in every room. Indicate **All Coaches/Directors**, (“C” or “D”), **Performers with a (“P”)**, **Adults (“A”)**, other **Children (“ch”)** and any **Infants (“I”)** ages two (2) and under. **DO NOT** assign more than (4) four people to a room. Also indicate by room: adjoining rooms, handicapped rooms or extended stays needed. All requests, other than extended stays booked in a reasonable amount of time, can only be requested, and are not guaranteed at any time by the hotel or Contest of Champions. If you plan on mailing this form, you must do so **at least (7) seven days prior** to the rooming list due date in your Agreement. Your final invoice cannot be calculated without this form. Duplicate form as needed. You may fax to 407-656-7466 or you may e-mail a similar form of your own to your Contest Representative.

Please Remember: Per your package agreement, the number of rooms being held for your group cannot be decreased after December 16, 2011. Individual packages may still be cancelled up until the dates specified in your agreement, however, entire rooms are considered 100% guaranteed after December 16, 2011.

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