Hotel or Event Location:

www.EventSupervisor.com

DAY AND DATE (Use separate sheet for each day)	MEETING TIMES:	MEAL TIMES: (Start - Finish) BREAKFAST
COMPANY/ORGANIZATION		LUNCH DINNER
ADDRESS (Include Street Name, Number, City, State, Zip Code)		OTHER
CONTACT(S)	PHONE NUMBER	
ATTENDANCE	DEPOSIT (Date & Amount)	MARQUEE/LOBBY READER BOARD INSTRUCTIONS / MEETING ROOM CHG

SEATING SPECIFICATIONS (Meeting and Meals)

TIME	LOCATION

MENUS (Except Breaks)

TIME	LOCATION

BREAKS

TIME	LOCATION

BAR

TIME	LOCATION

SLEEPING ACCOMODATIONS

_____SINGLS @_____EA
_____DBLS @_____EA
_____TWINS @_____EA
_____STS @_____EA

ARRIVAL: _____
DEPARTURE: _____
CUT-OFF DATE: _____

* WINE/CHEESE - VICE PRESIDENT

DETAILED BOOKING ETNRY ATTACHED COPY TO HOTEL RESERVATIONIST

__ GTD
__ CO
__ C/C (See Booking Ent)
__ 6 PM'S

BILLING INFORMATION

__ ON DEPARTURE: ____ CHECK ____ C/C ____ CASH

__ DIRECT BILL:

CREDIT APPROVAL
___ Complete ___ Pending_____

CHARGES:	MASTER	INDIVIDUAL
Rooms		
Tax		
Incidentals		
Group Charges		

ACCEPTED_____ DATE _____