

Hotel or Event Location:

www.EventSupervisor.com

DAY AND DATE (Use separate sheet for each day)		MEETING TIMES:		MEAL TIMES: (Start - Finish)	
COMPANY/ORGANIZATION				BREAKFAST	
ADDRESS (Include Street Name, Number, City, State, Zip Code)				LUNCH	
				DINNER	
				OTHER	
CONTACT(S)			PHONE NUMBER		
ATTENDANCE	DEPOSIT (Date & Amount)	MARQUEE/LOBBY READER BOARD INSTRUCTIONS		MEETING ROOM CHG	
SEATING SPECIFICATIONS (Meeting and Meals)			MENUS (Except Breaks)		
TIME	LOCATION	TIME	LOCATION		
BREAKS			BAR		
TIME	LOCATION	TIME	LOCATION		
SLEEPING ACCOMODATIONS			BILLING INFORMATION		
_____ SINGLS @ _____ EA _____ DBLS @ _____ EA _____ TWINS @ _____ EA _____ STS @ _____ EA * WINE/CHEESE - VICE PRESIDENT	_____ GTD _____ CO _____ C/C (See Booking Ent) _____ 6 PM'S	ARRIVAL: _____ DEPARTURE: _____ CUT-OFF DATE: _____	_____ ON DEPARTURE: _____ CHECK _____ C/C _____ CASH _____ DIRECT BILL: CREDIT APPROVAL _____ Complete _____ Pending	CHARGES: _____ MASTER _____ INDIVIDUAL Rooms _____ Tax _____ Incidentals _____ Group Charges _____	
DETAILED BOOKING ETNRY ATTACHED COPY TO HOTEL RESERVATIONIST			ACCEPTED _____	DATE _____	