

GRAND CHAPTER OF IOWA – HOUSING REQUEST FORM – OUT OF STATE MEMBERS

141st “Heart of the Country” Session

October 18 – 21, 2018

Cedar Rapids Marriott – 1200 Collins Road NE – Cedar Rapids, IA

King Suite with Queen Sofa Sleeper \$129 per night plus applicable taxes, etc.	Standard Guestroom with 2 Double Beds \$119 per night plus applicable taxes, etc.
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Please use a separate form for EACH ROOM requested (form may be duplicated)

Reservations must be received by September 30, 2018

Rooms/Bed styles will be assigned in the order the reservations are received.

All rooms are non-smoking

Name: _____ OES Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ (home) _____ (work)

E-mail Address: _____

Check-In Date: _____ Check-Out Date: _____

Please indicate 1st and 2nd Choice

Room/Bed Style Preferred: 1 King Suite: _____ (1 - 4 people) 2 Double Beds: _____ (3 - 4 people)

All Rooms – Non Smoking Please indicate any special needs: _____

Credit Card (circle one): Visa Master Card Discover American Express

Number: _____ Expiration date: _____

ALL RESERVATIONS MUST BE RESERVED WITH A CREDIT CARD.

**NOTE CHANGE: A CREDIT CARD MUST BE ON FILE FOR EACH PERSON SHARING THE ROOM
EACH INDIVIDUAL IN THE ROOM MUST CHECK IN WITH THE FRONT DESK!!!**

Names and Titles of those sharing this room with the above:

Name: _____

Title: _____

Credit Card Number: _____ Type: _____ Expiration date: _____

Name: _____

Title: _____

Credit Card Number: _____ Type: _____ Expiration date: _____

Name: _____

Title: _____

Credit Card Number: _____ Type: _____ Expiration date: _____

EVERYONE MUST CHECK IN AT THE HOTEL DESK

Larry and Deb Jones – 315 S. Dewey - Osceola, IA 50213

PH: 641-342-4645

email: Inmjones@iowatelecom.net or gdownin1@iowatelecom.net

If you would like a confirmation, please include a SASE.

(Not available until 10 days prior to session)

Name: _____

Hotel: _____ **Confirmation Number:** _____