

Today's Date: \_\_\_\_\_

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# NORTHWESTERN ATHLETICS

## Hotel Request Form for Visitors to Campus

Please submit this form to the business office **at least 3 days** prior to the visitor arriving to campus.

Requestor Name: \_\_\_\_\_ Team/Department: \_\_\_\_\_

### Guest Information

Number of Rooms: \_\_\_\_\_

Name of Guest(s) (First & Last Names):

1.	6.	11.	16.
2.	7.	12.	17.
3.	8.	13.	18.
4.	9.	14.	19.
5.	10.	15.	20.

Room Type Request\*: \_\_\_\_\_

Check-in Date: \_\_\_\_\_ Check-out Date: \_\_\_\_\_

Top 3 Hotel Choices:

1.
2.
3.

Comments: \_\_\_\_\_

Requestor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Room type requests are not guaranteed. Requests are dependent on hotel availability.

**Return to Business Office upon completion.**

Athletic Business Office Use Only:

Hotel: \_\_\_\_\_

Confirmation Number(s): \_\_\_\_\_

Confirmed Rate: \_\_\_\_\_ Initial & Date: \_\_\_\_\_