08/19/18	
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NORTHWESTERN ATHLETICS

Hotel Request Form for Visitors to Campus

Please submit this for campus.	m to the business office	e at least 3 days prior	to the visitor arriving to	
Requestor Name: Will	ie Catz	Team/Department:	Bowling	
Guest Information				
Number of Rooms: 4				
Name of Guest(s) (First	& Last Names):			
1. Willie Baron	6. Jacob Sherman	11.	16.	
2. Shari Baron	7.	12.	17.	
3. Michael Baron	8.	13,	18.	
4. Justin Sherman	9.	14.	19.	
5. Becky Sherman	10.	15.	20.	
Check-in Date: O9/21/18 Check-out Date: 09/22/18 I. Hilton Garden Inn 2. Hilton Orrington 3. Holiday Inn Comments: Requestor Signature: Willie Catz Digitally signed by Willie Catz Date: 2018.08.19 18:53:09-0500' Date: 08/19/18				
*Room type requests are not guaranteed. Requests are dependent on hotel availability Return to Business Office upon completion.				
Athletic Business Office U	Jse Only:			
Hotel:				
Confirmed Rate:			Initial & Date:	