



VOLUNTEER STATE DANCE CHALLENGE ROOM LIST FORM ONLY

SPECIFY: 2 beds/2people – D/D
1bed/2 people – K
1bed/1 person – S

	NAME PLEASE PRINT OR TYPE	Arrival Date 7 - 25	Departure Date 7 - 29
ROOM 1	SMOKING/NON D/D or K		
ROOM 2	SMOKING/NON		
ROOM 3	SMOKING/NON		
ROOM 4	SMOKING/NON		
ROOM 5	SMOKING/NON		
ROOM 6	SMOKING/NON		
ROOM 7	SMOKING/NON		

CONFIRMATION ADDRESS:

STUDIO _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 TELEPHONE _____ - _____
 E-MAIL _____

Hotel check-in time: After 3pm
 Hotel checkout time: before 12 noon
 Late checkout available for an extra charge

ENTRY DEADLINE JULY 10, 2007



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SPECIFY: 2 beds/2people – D/D
1bed/2 people – K
1bed/1 person – S

	NAME PLEASE PRINT OR TYPE	Arrival Date 7 - 25	Departure Date 7 - 29
ROOM 8	SMOKING/NON D/D or K		
ROOM 9	SMOKING/NON		
ROOM 10	SMOKING/NON		
ROOM 11	SMOKING/NON		
ROOM 12	SMOKING/NON		
ROOM 13	SMOKING/NON		
ROOM 14	SMOKING/NON		

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