



## Hotel Room Block Request Form

### Primary Contact Information

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred Phone Number: \_\_\_\_\_ [Home] [Office] [Cell]

### Organization Information

☐ For Profit ☐ Non-Profit

**Tax Exempt?** ☐ Yes ☐ No

Business or Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Website: \_\_\_\_\_

### Event Information

Event Name: \_\_\_\_\_

Event Start Date: \_\_\_\_\_

Event End Date: \_\_\_\_\_

Alternate Date(s): \_\_\_\_\_

Expected Attendance: \_\_\_\_\_

Brief Description of Event/Additional Comments:

### Room Night Estimate

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date:							
# of rooms:							

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Date:							
# of rooms:							

Target Daily Rate: \$ \_\_\_\_\_ Number of Guests per Room: \_\_\_\_\_ Comped Room Ratio: \_\_\_\_\_

Interested in multiple hotels to accommodate your group? ☐ Yes ☐ No

Breakfast included? ☐ Yes ☐ No

Comments – For Hotel Use

Decision Date: \_\_\_\_\_

☐ Please collect responses for me. ☐ I would like to receive responses directly.

For questions, please contact Jennifer Seaton, Director: (405) 216-7781 • [JSeaton@VisitEdmondOK.com](mailto:JSeaton@VisitEdmondOK.com)