

# Hotel Room Listing

*\*Duplicate form as needed  
Please do not include Executive Board Members*

Organization Name: IASC

School Name: \_\_\_\_\_

Advisor Name: \_\_\_\_\_

School Address: \_\_\_\_\_

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

Zip: \_\_\_\_\_

School Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Arrival Date: \_\_\_\_\_

Departure Date: \_\_\_\_\_

## Room #1 (Advisor's Room)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## Room # 3

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## Room # 2

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

## Room #4

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

**\*\*Fax to Lorie Demry at Carlyle High School (618)594-8286\*\***