

# FCCLA 2010 National Leadership Conference Housing Form



**Sheraton Chicago**  
 www.sheratonchicago.com  
 For questions call: (312) 329-7000

## ROOM RATE

Single/Double/Triple/Quad room rate is \$178.00 plus tax, currently 15.4%, per room per night. Rooms at the convention rate will be available July 1-10, 2010.

## MAKING RESERVATIONS

- Reservations must be made or postmarked by May 1, 2010 to be included in the room block reserved for FCCLA.
- Complete one (1) Housing Form per room reservation.
- The hotel requires that all reservations be secured by a check or major credit card, which will be used as a deposit.
- Due to the high demand for double bedded rooms, in most cases, double bedded rooms will be used to house three (3) or four (4) guests.
- If you are sharing housing with another school, please indicate. To avoid delays, send one housing form per reservation.
- The hotel will confirm reservations directly with the individual making the reservation.
- Requests for additional rooms after May 1, 2010 cannot be guaranteed housing.
- Changes to housing reservations should be made directly with the hotel.
- After completing this form make one copy for your records and send the original form with deposit to:

Sheraton Chicago  
 301 East North Water Street  
 Chicago, IL 60601  
 Fax: (312) 329-6417

## DEPOSIT / FINAL PAYMENT

- The hotel requires that all reservations be secured by a check or major credit card, which will be used as a deposit. One night's room and tax authorization per room will be processed to your credit/debit card. Please be aware that an authorization on a credit/debit card will be charged immediately and remove funds from your bank account at that time. The hotel will not accept purchase orders. **Requests received without a deposit will not be processed.**
- Checks for final payment must be received 10 days prior to arrival.
- Checks sent for deposit and final payment should be made payable to the Sheraton Chicago and sent directly to the hotel.

## CONFIRMATIONS

The hotel will confirm reservations within forty-eight (48) hours of receipt of this form via e-mail or fax. If you have not received a hotel confirmation forty-eight (48) hours, please contact the hotel directly at (312) 329-7000.

## CHANGES / CANCELLATIONS

- An early departure fee of one night's room and tax will apply if a guest checks out prior to the confirmed departure date. Guests will have an opportunity to reconfirm their dates of stay upon check-in.
- Guaranteed hotel reservations must be cancelled seventy-two (72) hours prior to arrival date or the hotel will bill you for the first night's stay. To avoid a charge, please notify the hotel at least seventy-two (72) hours prior to your arrival date.

## CHECK-IN

- Hotel check-in is at 3:00 p.m. Check with the hotel about special arrangements if you must arrive before check-in time or after 6:00 p.m.
- Advisers should check the group into the hotel at one time to secure room assignments and keys. Have a copy of the Housing Form, hotel confirmation, and valid picture identification with you. If you are registering as a state group, this is your state adviser's responsibility.
- If you plan to pay your final hotel balance by check, the full anticipated balance must be received ten (10) business days prior to your arrival.
- Outside telephone service will be restricted in rooms not leaving a credit card deposit. Pay movies and room service will be on a cash-only basis.
- Participants should not charge incidental expenses (phone calls, movies, room service, meals, etc.) to their room bills.
- The industry standard gratuity for baggage handling is usually \$2.00 per bag into and out of the hotel.

## BILLING:

The hotel will provide one bill per room. For group billing please contact Allison Watson at (312) 329-7043.

## STATE HOTEL ASSIGNMENTS

Contact your state adviser to see how your state has opted to handle housing. The following states have been assigned to the Sheraton Chicago Hotel:

Alabama	Georgia	Massachusetts	Pennsylvania
Alaska	Hawaii	Minnesota	Puerto Rico
California	Indiana	Mississippi	South Carolina
Colorado	Iowa	Missouri	Vermont
Delaware	Louisiana	New Mexico	Virgin Islands
District of Columbia	Maine	North Carolina	West Virginia
Florida	Maryland	North Dakota	Wisconsin
			Wyoming

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

First Name (Adviser/Chaperone) \_\_\_\_\_ Last Name \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Fax \_\_\_\_\_

*An email or fax is required for confirmation*

**ARRIVAL:** Date \_\_\_\_\_ Time \_\_\_\_\_

We plan to arrive by:  Air  Bus  Train  Car  Van

**DEPARTURE:** Date \_\_\_\_\_ Time \_\_\_\_\_

**ROOM REQUEST:**  Single  Double  Triple  Quad

List name(s) of all occupants. Maximum room occupancy is four (4).

1.	<input type="checkbox"/> Adult <input type="checkbox"/> Student	<input type="checkbox"/> Female <input type="checkbox"/> Male
2.	<input type="checkbox"/> Adult <input type="checkbox"/> Student	<input type="checkbox"/> Female <input type="checkbox"/> Male
3.	<input type="checkbox"/> Adult <input type="checkbox"/> Student	<input type="checkbox"/> Female <input type="checkbox"/> Male
4.	<input type="checkbox"/> Adult <input type="checkbox"/> Student	<input type="checkbox"/> Female <input type="checkbox"/> Male

Please include requirements for handicap-accessible room.

**SHARED HOUSING:**  Yes  No

Name of School \_\_\_\_\_

Adviser \_\_\_\_\_ School Phone \_\_\_\_\_

**DEPOSIT:**  CHECK  CREDIT CARD

Type of card:  AMEX  MasterCard  Visa  Discover

Card Holder's Name \_\_\_\_\_ Card Holder's Signature \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

*Make checks payable to the Sheraton Chicago in U.S. funds drawn on a U.S. bank.*