

**VHSL SPRING JUBILEE 2013
RU TEAM LODGING REQUEST**



Conference Services
Box 6911
Radford, VA 24142
Phone: 540-831-5800
Fax: 540-831-6036
conf-serv@radford.edu

School Name: _____

Team/Sport: _____ Men's Women's (circle)

Coach/Primary Contact: _____

Phone: (____) _____ Cell Phone (____) _____
If available

Fax: _____ Email: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Arrival Date: (Circle) Thursday (June 6) Friday (June 7)
Estimated time of Arrival: _____ AM PM

Number of Coaches needing lodging: _____ Male _____ Female

Number of Athletes needing lodging: _____ Male _____ Female

To Request Lodging

(1) **Call or E-mail** RU
Conference Services
Office (540) 831-5800
conf-serv@radford.edu

(first come – first serve)

(2) **Fax or E-mail** this
form along with a team
roster to Conference
Services 1 WEEK IN
ADVANCE.

On-Campus Lodging is air conditioned, this year, with linens included (athletes may prefer to bring their own pillow).
The flat per person rate applies to Thursday – Saturday nights. Athletes will stay two to a room. Because of the nature of the event, this is a flat rate, with no reductions for teams that arrive late or leave early. Meals are not included.

\$60.00 Rate per person (includes applicable taxes)
Rate includes lodging for up to 3 nights (Thurs. – Sat.)

X _____ Total number of athletes & coaches requesting lodging

\$ **Total Amount Due**

Payment Method: *(Payment or Purchase order due IN ADVANCE)*

Payment may be made payable to: **Radford University** (Federal ID# 54-6001789)
 Conference Services, PO Box 6911, Radford VA 24142

Check *(Correct Name, Address, and Phone number should be on Check)*

Credit Card: MC Visa Expiration Date ____/____

Card Number -- CVV# from back of card

PLEASE DO NOT EMAIL OR FAX YOUR CREDIT CARD NUMBER. PLEASE CALL US WITH THE NUMBER 540-831-5800 AFTER YOU FAX/EMAIL THIS FORM

Purchase Order: Purchase Order Number: _____

Guest Agreement

I understand that full payment or copy of purchase order is due upon arrival and each individual is responsible for personal insurance/liability while staying on the RU campus. I understand that I am responsible for the key(s) that have been issued to me and for any damage to the room or furniture replacement costs as necessary. A \$50.00 lost room key charge will be billed to me for any lost key(s). I understand that the Conference Staff has the right to confront any guest for purposes of identification or policy concerns. Finally, I understand that the Conference Staff reserves the right to ask any guest to vacate the room for policy violations.

Refer to www.radford.edu/~conf.serv (select "policies & procedures").

Signature _____ (Date) _____