

# 2018 National Leadership & Skills Conference Rooming List

(Hotel Arrival date can be **NO LATER** than 6/25/18 and Departure date **NO EARLIER** than 6/30/18)

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

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

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

Phone Number: \_\_\_\_\_

email address: \_\_\_\_\_

| Name (Last/First) | Arrival | Departure | Total Persons in Room | Special Accommodations | Room Configuration                    |
|-------------------|---------|-----------|-----------------------|------------------------|---------------------------------------|
|                   |         |           |                       |                        | ___ Single Bed in Room (King)         |
|                   |         |           |                       |                        | ___ Two Beds in Room (Two Queen beds) |
|                   |         |           |                       |                        |                                       |
|                   |         |           |                       |                        |                                       |

| Name (Last/First) | Arrival | Departure | Total Persons in Room | Special Accommodations | Room Configuration                    |
|-------------------|---------|-----------|-----------------------|------------------------|---------------------------------------|
|                   |         |           |                       |                        | ___ Single Bed in Room (King)         |
|                   |         |           |                       |                        | ___ Two Beds in Room (Two Queen beds) |
|                   |         |           |                       |                        |                                       |
|                   |         |           |                       |                        |                                       |

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|                   |         |           |                       |                        |                                       |

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|                   |         |           |                       |                        |                                       |
|                   |         |           |                       |                        |                                       |

Billing Information (Check One)     Check     Indirect Charge     Credit Card

If using a credit card, please enter the following information:

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Credit Card Type: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Billing Phone Number: \_\_\_\_\_ Total Amount Billed: \$ \_\_\_\_\_

The California delegation attending the NLSC is required to stay at the Horseshoe Southern Indiana, 11999 Casino Center Dr., Elizabeth, IN 47117 due to SkillsUSA Board policy. Room cost is **\$147.63/night** for single/double or for triple/quad. **IF YOU ARE PAYING BY CHECK, THE HOTEL MUST RECEIVE THE CHECK 7 DAYS PRIOR TO YOUR ARRIVAL DATE.** All room reservations must be handled through the SkillsUSA State Director. **This form must be submitted via email to [clay.mitchell@skillsusaca.org](mailto:clay.mitchell@skillsusaca.org) no later than Monday, May 14, 2018.**