

# 2012 Small Fry Basketball Hotel Rooming List

## Due with payment to Jeff Milkie by March 5, 2012

Name of Team \_\_\_\_\_

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

Contact Person \_\_\_\_\_

Bus. Phone \_\_\_\_\_ Home \_\_\_\_\_ Fax \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Arrival Day/Date \_\_\_\_\_ / \_\_\_\_\_ Time \_\_\_\_\_ a.m. OR p.m.

Departure Day/Date \_\_\_\_\_ / \_\_\_\_\_

### Room 1

A1. \_\_\_\_\_

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

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

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

### Room 2

A1. \_\_\_\_\_

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

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

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

### Room 3

A1. \_\_\_\_\_

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

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

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

### Room 4

A1. \_\_\_\_\_

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

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

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

### Room 5

A1. \_\_\_\_\_

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

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

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

### Room 6

A1. \_\_\_\_\_

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

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

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

**Please Fill Out Forms Carefully.**

**You are allowed only 6 rooms per team. Parents must call for their own reservations. All rooms must be paid in full to receive tax exempt status. 4 people per room max.**

**How many rooms will you need? \_\_\_\_\_ X How many nights? \_\_\_\_\_ = \_\_\_\_\_**

**Take the total number of Rooms \_\_\_\_\_ X that number by \$109 per night = \$ \_\_\_\_\_**

**Total Cost for Rooms \$ \_\_\_\_\_**