



Conference Housing Reservation Form

Please print and mail this form to the address below.

UNO Department of Student Housing
Pontchartrain Hall North Rm. 128
2000 Lakeshore Drive
New Orleans, LA 70148
Fax: 504-280-5584

Conference Group Information

Group Name: _____ Number of Participants: _____

Type of Group: Adult Under 18 Male Female Co-ed [Check all applicable.]

Number of Group Participants: _____ Number of Staff Participants: _____

(For every 8 group participants under the age of 18, one chaperone is required.)

Conference Sponsor (for billing purposes)

Sponsor Name: _____ Phone Number: _____

Email Address: _____ Fax Number: _____

Business Address: _____

Street Address City State Zip Code

Conference On-Site Coordinator (Each group must have an on-site contact person. This person will also be contacted to set up room assignments).

On-site Coordinator Name: _____ Cell Phone Number: _____

Fax Number: _____ Email Address: _____

Residency Requests

Please let us know of any special needs your group participants may require.

Arrival/Departure Information

Arrival Date: _____ Arrival Time: _____

Departure Date: _____ Departure Time: _____

Method of Payment

If we can accommodate your request, a representative from our department will contact you. At the time of reservation, a 25% deposit will be required in the form of a check or money order. Your stay will not be confirmed until receipt of the deposit. This deposit will secure your reservation and will be

refunded to you 7-10 days after your departure. The entire balance will be due and payable to the University of New Orleans prior to your check in.

Signature _____