

# MICHIGAN DANCE CHALLENGE

## ROOM LIST FORM ONLY

SPECIFY: 2 beds/2people – D/D  
 1bed/2 people – K  
 1bed/1 person – S

	NAME PLEASE PRINT OR TYPE	Arrival D/D.K.S	Depart D/D.K.S
ROOM 1	SMOKING/NON		
ROOM 2	SMOKING/NON		
ROOM 3	SMOKING/NON		
ROOM 4	SMOKING/NON		
ROOM 5	SMOKING/NON		
ROOM 6	SMOKING/NON		
ROOM 7	SMOKING/NON		
ROOM 8	SMOKING/NON		
ROOM 9	SMOKING/NON		

CONFIRMATION ADDRESS:

STUDIO \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 TELEPHONE \_\_\_\_\_ - \_\_\_\_\_  
 E-MAIL \_\_\_\_\_

Hotel check-in time: After 3pm  
 Hotel checkout time: before 12 noon  
 Late checkout available for an extra charge