

Hotel Request Form

National JBQ Festival

CONTACT INFORMATION

Name of Church & Team:	
City & State:	
Contact Name:	
Contact Phone Number:	
Contact Email:	
HOTEL INFORMATION	
Name for Reservation:	
# of Rooms Needed:	
Arrival Date & Time:	
Departure Date & Time:	
Single/Double/Triple/Quad	d:
# of People per Room:	

Please return form to:

Shaun Gleason

Exceptional Hospitality Solutions

shaun@exceptionalhospitalitysolutions.com

(262) 581-3068