

**DEPT. of LOUISIANA AMERICAN LEGION**

Date Rcvd \_\_\_\_\_

**DEPT. CONVENTION GENERAL RESERVATION HOUSING FORM**

**June 6-9, 2019 (RESERVATION DEADLINE – May 1st, 2019)**

**MAIL ALL HOUSING FORMS TO:**

Reservation Confirmation No. \_\_\_\_\_

Dept. of La. American Legion  
P.O. Box 3749  
Baton Rouge, Louisiana 70821

**NOTES:**

- 1. IF NOT USING CREDIT CARD, A SEPARATE CHECK FOR 1<sup>st</sup> NIGHT ROOM FEES MUST BE ATTACHED TO THIS RESERVATION FORM.**
- 2. ONLY ONE ROOM RESERVED PER FORM.**
- 3. CHECK IN TIME IS 2:00 PM**
- 4. IF GROUND FLOOR IS REQUIRED, YOU MAY BE MOVED TO AN OVERFLOW HOTEL**

**HEADQUARTERS HOTEL:**

**AMERICAN LEGION, AUXILIARY & SAL HEADQUARTERS - BEST WESTERN OF ALEXANDRIA**

Room Type: \_\_\_ 2 Queen Beds or \_\_\_ King \$84.00 (plus tax) \_\_\_ Suite \$98.00 (plus tax)  
\_\_\_ Hospitality Suite \$155.00 (plus tax) \_\_\_ Ground Floor \_\_\_ Handicapped

**OVERFLOW HOTEL PREFERENCE IF BEST WESTERN IS FILLED:**

(FREE BREAKFAST FOR OVERFLOW HOTEL GUESTS AT THE BEST WESTERN ONLY IF BOOKED VIA THIS HOUSING FORM)

**COMFORT INN** \_\_\_ 2 Double Beds or \_\_\_ King \$84.00 (plus tax)

**QUALITY INN** \_\_\_ 2 Double Beds or \_\_\_ King \$84.00 (plus tax)

**NAME** \_\_\_\_\_ **OFFICE/TITLE** \_\_\_\_\_

**Phone Pri** \_\_\_\_\_ /**Sec** \_\_\_\_\_ **Email** \_\_\_\_\_

Street	City	State	Zip Code
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**ARRIVAL DATE** \_\_\_\_\_ **DEPARTURE DATE** \_\_\_\_\_

**NAME ON CARD:** \_\_\_\_\_ **CARD NO.** \_\_\_\_\_

**EXPIRATION DATE ON CARD:** \_\_\_\_\_ **TYPE OF CARD** \_\_\_\_\_

**CHECK # (IF NOT USING CREDIT CARD)** \_\_\_\_\_ **AMOUNT** \_\_\_\_\_

**NAMES of ADDITIONAL ROOM OCCUPANTS**

\_\_\_\_\_  
\_\_\_\_\_

**ROOMS ARE ASSIGNED BY DATE/ORDER RECEIVED**