



# Hotel Team Reservation Form

*Due as part of the team registration materials by April 15, 2011*

State: \_\_\_\_\_ State Coordinator Name (or official designee): \_\_\_\_\_

Before completing this form, please reserve team guest rooms by calling the hotel at 1-800-233-1234 or by visiting the following website - <https://resweb.passkey.com/go/2011NHSMT>. You will be quoted the NHSMTTC guest room rate of \$152.00 plus 12.27% tax. Reserve your team rooms at this rate and obtain guest room reservation confirmation numbers for each room.

1. Confirmation Number: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

2. Confirmation Number: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

3. Confirmation Number: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

4. Confirmation Number: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

(Optional/For use if necessary)

5. Confirmation Number: \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

After completing, submit with all registration forms by mailing to:

Susan Nusall ■ Arizona Foundation for Legal Services & Education ■ 4201 N. 24 St., Suite 210 ■ Phoenix, AZ ■ FAX:602-773-3105