## **ACCOMMODATIONS INFORMATION**

THIS COMPLETED FORM MUST BE SUBMITTED IN THE SHOW OFFICE
WHEN PICKING UP YOUR EXHIBITOR PACKET!

Total Number of Rooms Booked at:	V	HEN PICKING UP	YOUR EXHIBITOR PACKET!	
Total Number of Rooms booked at:	# of Nights	# of Rooms	Name of Person Paying for Lodging	The Fort Worth CVB provides
* Courtyard FW University 3150 Riverfront Drive	# Of Nights	# Of ROOMS	Name of reison raying for Louging	a financial incentive package to
				the ApHC to hold the show in Fort
* Fairfield Inn & Suites 1505 S University Drive				Worth. In order to sustain their finan- cial support, ApHC must certify the
1303 3 Offiversity Drive				number of hotel room nights used in
* Home2 Suites 1145 University Drive				Fort Worth during the show.
1143 Offiversity Drive				Show attendees must provide lodging accommodations informa-
* Residence Inn 2500 Museum Way				tion in order to pick up your ex-
2500 Museum Way				hibitor packet.
* Sheraton FW Downtown 1701 Commerce Street				In addition, please encourage all those in attendance at the show,
1701 commerce street				whether exhibiting or not, to provide
RV onsite Live Locally				information on lodging accommoda- tions to assist ApHC in this process
Other (please specify hotel name/address)				and to ensure ongoing financial sup-
Hotel		Address		port from the City of Fort Worth.
Other (please specify hotel name/address)				
Hotel		Address		
Other (please specify hotel name/address)				
Hotel		Address		
Other (please specify hotel name/address) Hotel				
		Address		
(please see reservation forms)				
'	HOTEL GUEST	S ARE ASSOCIA	TED WITH THE FOLLOWING HORS	ES:
Back #	Horse Name			Reg #
Back #	Horse Name			Reg#
	-			- 6
Back #	Harra Name			Reg #
васк #	_ Horse Name	-		Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
	-			- 6
Dools #	Horse Name			Dog #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
	_ HOUSE Maille			