ACCOMMODATIONS INFORMATION

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

	W	HEN PICKING UP	YOUR EXHIBITOR PACKET!	
Total Number of Rooms Booked at:				
* Courtyard Fort Worth University Drive	# of Nights	# of Rooms	Name of Person Paying for Lodging	The Fort Worth CVB provides a financial incentive package to
* Fairfield Inn & Suites 1505 S University Drive				the ApHC to hold the show in Fort Worth. In order to sustain their finan- cial support, ApHC must certify the
* Home2 Suites 1145 University Drive				number of hotel room nights used in Fort Worth during the show.
* Residence Inn 2500 Museum Way				Show attendees must provide lodging accommodations informa- tion in order to pick up your ex-
* TownePlace Suites University Area 3450 W Vickery Blvd				hibitor packet. In addition, please encourage
_				all those in attendance at the show, 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) Hotel				and to ensure ongoing financial support from the City of Fort Worth.
Other (please specify hotel name/address)			·	,
Hotel Other (please specify hotel name/address)				
Hotel				
Other (please specify hotel name/address) Hotel				
		Address		
(please see reservation forms)				
н	OTEL GUEST	S ARE ASSOCIAT	ED WITH THE FOLLOWING HORS	ES:
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg#
Back #	Horse Name			Reg#
Back #	Horse Name			Reg#
Back #	Horse Name			Reg#
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #
Back #	Horse Name			Reg #