

Group Housing Request Form

A minimum of 10 rooms is required in order to secure a group hotel block with this form. If your room count is fewer than 10, please complete the regular online registration form to book accommodation. ***Please read the following instructions.***

Complete all sections of this form before submitting. You will receive an e-mail once your hotel block is assigned, along with specific booking instructions. Ensure to register your group members for the conference online.

All conference registrations and hotel bookings for your group should be completed no later than September 17, 2025.

This form must be uploaded to a secure link [HERE](#) for the groups' manager to access it. Forms will not be accepted by email; our secure server will reject any emails with credit card information.

1. Group Contact Information

Group Contact First Name: _____ Group Contact Last Name: _____

Group Name: _____

Booking Agency/3rd
Party Agency (if appl) _____

Address: _____

City: _____ State/Country: _____ Zip/Postal Code: _____

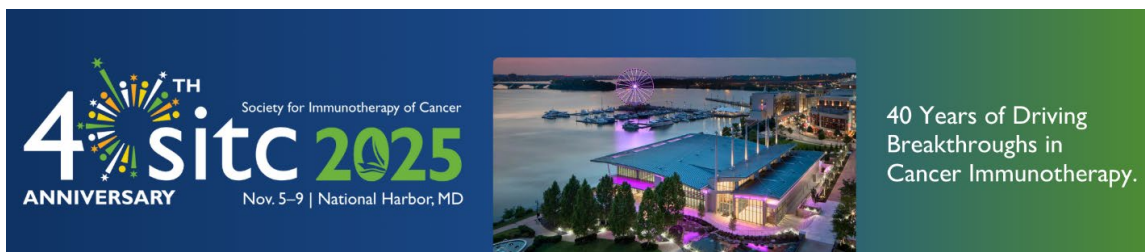
Daytime phone #: _____ Extension: _____

Group Contact's Email: _____

2. Room Requirements

Please indicate the number of rooms needed per night Room Types are

| | Mon, Nov 3 | Tue, Nov 4 | Wed, Nov 5 | Thurs, Nov 6 | Fri, Nov 7 | Sat, Nov 8 | Sun, Nov 9 | TOTAL ROOM NIGHTS |
|--------------|---------------|---------------|---------------|-----------------|---------------|---------------|---------------|----------------------|
| King Bed | | | | | | | | |
| 2 Doubles | | | | | | | | |
| Total | | | | | | | | |



- Each group request requires a valid credit card number as a guarantee to process group requests. Credit cards will only be charged by the housing concierge if cancellation fees apply. Please see the cancellation policy below.
- Group contact must set up a Master Account with the hotel once the block has been confirmed by the housing concierge and notify the housing concierge once it has been set up.
- **Please do not send credit card information by email. This form must be uploaded [HERE](#). Forms will not be accepted by email. Our secure server will reject emails with credit card information.**
- **All individuals must be registered for SITC 2025 by September 17, 2025, 5pm ET. The group code must be used to assign the hotel to each attendee's record by entering it during the online housing process or by sending a rooming list to the Group Housing Concierge.**
- Only the Group contact indicated in section 1 of the group form is authorized to manage the group block and book reservations for the group members.

Attrition and Cancellation Policy

Due to hotel policies, associations are now held financially responsible for hotel rooms not occupied.

Attrition Table

| | |
|---|---|
| From signing up to Aug 6, 2025 | Up to 20% of the total room nights can be released without penalty |
| After Aug. 6, 2025, to September 17, 2025 | 10% of the remaining rooms can be released without penalty |
| After September 17, 2025 | No further release without penalty. Responsible for all Contracted Housing. |

- **As of September 17, 2025, 5pm ET any rooms without names will automatically be released by the Housing Concierge and an attrition penalty charged at the hotel room rate will apply for room nights released.**
- All reservation changes and cancellations must be made in writing directly to Group Housing Concierge by September 17, 2025.
- After September 17, 2025, all registration cancellations will result in the cancellation of the individual hotel reservation, and attrition penalties may apply. Substitutions will be accepted if received at the time of cancellation. Cancelled rooms cannot be reinstated.
- SITC is not responsible for no-shows or early departure fees charged by the hotels or rooms resold due to non-arrival.
- SITC takes no responsibility should a room preference not be available at check-in

By signing this form, you and your Group are accepting financial responsibility for the entire room block indicated in the grid above and understand that charges for the room block will be based on the method of payment made herein.

Print Name: _____

Signature: _____ **Date:** _____

Phone #: _____

E-mail: _____

[Upload Form and Credit Card Guarantee
HERE](#)

SITC Housing Bureau
c/o Showcare Event Solutions
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