# **Group Housing Request Form**

<u>A minimum of 10 rooms</u> 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 <u>HERE</u> for the groups' manager to access it. Forms will <u>not</u> 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/3 <sup>rd</sup> 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								



### 4. Payment/ Authorization

A credit card guarantee is required to process group requests. Cards must be valid through <u>December 2025</u>. Please complete the information below; your signature is required to process this Group Hotel Block Request Form.

Please indicate the method of payment:	
Guarantee only to the credit card on file (I	ndividual pays own)
Room and tax to the credit card on file (G	roup must set up a master account with the hotel)
All charges to the credit card on file (Grou	p must set up a master account with the hotel)
	Other (please specify)
(Choose one)  ☐ VISA ☐ Master Card ☐ AMEX	
Card Number	Expiration date (month/ year)
Billing Address	
Name of Cardholder (please print)	A signature is required, authorizing charge for cancellation and acknowledging policies (see page 2)

PLEASE BE SURE TO COMPLETE ALL FOUR SECTIONS OF THIS FORM AND SIGN THE HOUSING AGREEMENT BEFORE SUBMITTING

secure upload - HERE

## **Group Housing Policies/ Payment Schedule**

## Reservation Method (Online or Rooming List)

Please indicate how reservations will be made:

\_\_\_\_\_The complete rooming list in Excel format must follow the room block commitment pattern (including a maximum number of rooms on peak, room types and check-in / check-out patterns) and must include the following information for each reservation.

The rooming list deadline is September 17, 2025.

Information required on the rooming list (template will be provided):

First and last names of all guests in each room

Guest's email address

Room type (only specify if you have contracted different room types)

Check-in and check-out dates

Number of guests per room

Number of beds required

Special requests (i.e., late arrival, wheelchair accessible, etc.)

- A dedicated Group Housing Concierge has been assigned to assist groups with block requests and book group reservations.
   Please contact the group concierge at the email address or phone number indicated below for assistance with group reservations.
   Please note that reservations cannot be accepted by phone. You will receive an e-mail once your block is booked within 3 business days.
- Complete the Group Housing Request Form for requests of 10 or more sleeping rooms and submit it to the SITC Housing Concierge at a secure link <u>HERE</u>
- All group requests received will be assigned on a first-come, first-served basis.

- 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 <u>must be uploaded HERE</u>. 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 sitc@showcare.com