



2019 SUMMER CONFERENCE SERVICES INDIVIDUAL GUEST APPLICATION

GUEST INFORMATION:

Send billing invoice to (if different from guest information):

Name: _____

Name: _____

Postal Address: _____

Postal Address: _____

Phone: _____

Phone: _____

Email Address: _____

Email Address: _____

UGA Student? Over 18 years of age at check-in?

SCHEDULING INFORMATION:

Check In Date: _____ Time: _____

Double Rooms:

Checkout Date: _____ Time: _____

Number of Guests: Male: _____ Female: _____

Total Number of Nights Required: _____

Single Rooms:

Linen Package Requested: _____

Number of Guests: Male: _____ Female: _____

(A linen package includes a pillow, pillowcase, blanket, two flat sheets, two bath towels, a hand towel and a face towel.)

Other comments regarding reservation:

While every effort will be made to accommodate this request, submission of this application does not guarantee availability of spaces in particular residence halls or reservation of particular dates. Please send this completed request to the email address below.

CONTACT INFORMATION:

Summer Conference Services | HSC Community Office | Brown Hall, Room 104 | 100 Fox Road | Athens, GA 30609
(v) 706.713.2654 | (f) 706.227.4486 | hsgpsc@uga.edu