

**139th ANNUAL SESSION**

**NATIONAL BAPTIST CONVENTION, USA INC.**

**Dr. Jerry Young, President**



**New Orleans, LA  
General Housing Form  
September 2, 2019 – September 6, 2019**

**DEADLINE:** July 31, 2019 @ 5pm est. 1 room per General form. (No TBA's will be accepted)

**HOTEL REQUEST:** Please send the original form by fax or call the toll free number. If mailing the form, it must be sent by FedEx or UPS, DO NOT SEND BY US MAIL. A credit card for guarantee and the deposit is required and cards will be charged a \$200 deposit. It is at the discretion of the hotel as to whether they will charge the credit card. **NO CHECKS** will be accepted.

**Fed Ex or UPS to:**

Experient Housing  
5202 President Court G100  
Frederick, MD 21703  
Email: [bap@experient-inc.com](mailto:bap@experient-inc.com)  
Toll Free Number: 800-424-5250 Fax: 888-772-1888  
Hours of Operation: Monday-Friday 8am-5pm EST

**GROUP BLOCKS:** All multiple room requests must be submitted with a completed housing form, rooming list and a credit card on which to charge a \$200 deposit per room. It is at the discretion of the hotel as to whether they will charge the credit card. **NO CHECKS WILL BE ACCEPTED.** All requests for 10 or more rooms, regardless of group affiliation are subject to **APPROVAL** by the **NBC Housing Office.**

**CHANGES/CANCELLATIONS:** Changes and cancellations can be made by emailing: [bap@experient-inc.com](mailto:bap@experient-inc.com), via fax, or by mail. Any cancellation received **after August 7, 2019 @ 5pm est.** will forfeit a deposit of \$200 at the assigned hotel. Delegates have until **August 7, 2019 @ 5pm est.** to make changes/cancellations with the Experient Housing. After **August 11, 2019** (we give the hotels 3 business days to upload the rooming list and update their system before they can accept changes from the guest) delegates will need to contact the hotel directly. Penalties for early departures are enforced and vary by hotel. Failure to arrive on your scheduled date will result in a no-show, the loss of your full deposit, and cancellation of your entire reservation.

**ACCOMMODATIONS:** Bed types are not guaranteed and are assigned on "first come - first serve" basis, based upon availability.

**ROOM ACKNOWLEDGMENTS AND CONFIRMATIONS:** Upon completion of your reservation requests, **Experient Housing** will EMAIL acknowledgments. The assigned hotel may or may not send confirmation numbers. Rate is inclusive of rebate/commission to the organization.

**(PLEASE TYPE OR PRINT AND COMPLETE ALL INFORMATION)**  
**REGISTRANT: PERSON TO WHOM ACKNOWLEDGMENT WILL BE EMAILED**

NAME: \_\_\_\_\_

MAILING ADDRESS OR P.O. BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE NUMBER: DAY: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_

**ROOM INFORMATION:**

ARRIVAL DATE: \_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_

**CHECK ONE:**

- King Bedded Room (1 room with 1 King Bed)                       Double / Double Room (1 room with 2 Double Beds)  
 ADA Accessible

Special Requests/ADA requirements: (please Explain): \_\_\_\_\_

Number of Adults \_\_\_\_\_ Number of Children \_\_\_\_\_

Occupant Names: **List all occupant names and arrival/departure dates if different**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

**ALL occupant names MUST be listed in order to assign the appropriate bed type**

**ENTER HOTEL CHOICE (S): (Please choose four choices in order of preference)**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

**PAYMENT INFORMATION**

By signing below, I authorize the hotel to charge the required deposit of \$200.00 to the credit card provided.

***NO CHECKS ACCEPTED.***

**Please Note: Hotel reservations will not be booked without a valid credit card. Credit cards must be valid through 09/19.**

American Express    Discover    MasterCard    Visa

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature \_\_\_\_\_

Billing Address: \_\_\_\_\_

<p align="center"><b>HOTEL NAME</b></p> <p>Please note: Taxes &amp; Fees *Not included in the room rates</p> <p>9% State Tax 4.45% Local Tax 1.75% Assessment Fee \$1.00, \$2.00 or \$3.00 Occupancy fee (depending on the size of the hotel)</p> <p align="center"><b>** HOTELS**</b></p>	<p align="center"><b>DISTANCE</b></p> <p align="center"><b>To: Ernest Morial Convention Center</b></p>	<p align="center"><b>RATE</b></p> <p align="center"><b>Single/Double/ Triple/Quad</b></p>	<p align="center"><b>SUITE RATE (P+1=Parlor + 1Bedroom)</b></p>
<p align="center"><b>Courtyard Convention Center</b></p>	<p align="center"><b>3 Blocks</b></p>	<p align="center"><b>\$119.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Courtyard-Iberville</b></p>	<p align="center"><b>1.3 Miles</b></p>	<p align="center"><b>\$130.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Courtyard-St. Charles</b></p>	<p align="center"><b>1 Mile</b></p>	<p align="center"><b>\$119.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Hampton Inn &amp; Suites</b></p>	<p align="center"><b>5 Blocks</b></p>	<p align="center"><b>Single/Double \$139.00 Triple/Quad \$149.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Marriott at the Convention Center</b></p>	<p align="center"><b>1 Block</b></p>	<p align="center"><b>\$149.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Renaissance Arts Hotel</b></p>	<p align="center"><b>6 Blocks</b></p>	<p align="center"><b>\$149.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Residence Inn</b></p>	<p align="center"><b>5 Blocks</b></p>	<p align="center"><b>\$130.00</b></p>	<p align="center"><b>Upon request</b></p>
<p align="center"><b>Springhill Suites</b></p>	<p align="center"><b>4 Blocks</b></p>	<p align="center"><b>\$130.00</b></p>	<p align="center"><b>All Suite Hotel</b></p>