

**107th SESSION OF THE NATIONAL BAPTIST CONGRESS OF CHRISTIAN EDUCATION
DR. GEORGE W. WADDLES, SR., CONGRESS PRESIDENT**

**AUXILIARY OF THE NATIONAL BAPTIST CONVENTION USA, INC.
DR. JULIUS R. SCRUGGS, NATIONAL PRESIDENT**



**GENERAL HOUSING FORM
JUNE 18 – JUNE 22, 2012
ST. LOUIS, MO**

HOTEL REQUEST: Fax or mail (**Only One**) housing request form. Telephone reservations will **NOT** be accepted. A deposit of \$200.00 for each room must accompany all housing request. Deposits will be accepted in the form of **CERTIFIED CHECK, MONEY ORDER, OR CREDIT CARD**. Make checks and money orders payable to NBC Housing Bureau. A \$25.00 Service charge will be applied to checks returned for non-sufficient funds. No checks will be accepted after May 1, 2012

All reservation requests will be made through the SLCVC Housing Bureau. **Fax or mail only once (Do not send form twice or deposit may be charged twice)**

DEADLINE: **DELEGATES** - MAY 18, 2012. **GROUP BLOCKS** - MAY 6, 2012. Requests received after the deadline could possibly be assigned at a hotel not in the housing package.

DEPOSIT: A \$200 deposit for each room reservation is required at the time of booking. Deposit will be accepted in the form of **CERTIFIED CHECK, MONEY ORDERS OR CREDIT CARD**. Make checks payable to the **NBC Housing Bureau**. Should your \$200 deposit check have insufficient funds or credit card be declined your room reservation will be cancelled.

GROUP BLOCKS: All multiple room requests must be submitted with a completed housing form, rooming list and required \$200 deposit per room. **All requests for 10 or more rooms regardless of group affiliation are subject to APPROVAL by the NBC Housing Office.**

CHANGES/CANCELLATIONS: Make changes and cancellations directly in writing only with the **NBC Housing Office or the SLCVC**. Reservations secured with a check deposit will be assessed a \$25.00 processing fee if cancelled at any time. **ANY ROOM RESERVATION CANCELLED ON OR AFTER MAY 4, 2012 WILL FORFEIT THE \$200.00 DEPOSIT.** All no – shows will be charged one night's room and tax.

ACCOMMODATIONS: In the event none of your choices are available, every effort will be made to assign comparable housing based on your first choice. Bed types are **NOT** guaranteed and are assigned on a first come first served basis based on hotel availability.

ROOM ACKNOWLEDGEMENTS & CONFIRMATIONS: Acknowledgements will be sent after each reservation booking, modification and/or cancellation. Review acknowledgements carefully for accuracy. If you do not receive an acknowledgement within 14 days after any transaction, please call the Housing Bureau at **888-882-5178**. The assigned hotel may or may not send confirmation numbers. Rate is inclusive of rebate/commission to the organization.

Mail or Fax (**NOT BOTH**)
(Fax only if guaranteeing with a credit card)
SLCVC/NBC Housing
701 Convention Plaza Suite 300
St. Louis, MO 63101
FAX: (314)-621-9467 TOLL FREE (888)-882-5178

(PLEASE TYPE OR PRINT AND COMPLETE ALL INFORMATION) ST. LOUIS, MO 2012
REGISTRANT: PERSON TO WHOM ACKNOWLEDGMENT WILL BE SENT GENERAL FORM

NAME: _____

ORGANIZATION/CHURCH: _____

MAILING ADDRESS OR P.O. BOX: _____

CITY: _____ STATE: _____ ZIP CODE _____

TELEPHONE NUMBER: DAY:(____) _____ EVE:(____) _____ FAX:(____) _____

(This is the quickest and most reliable method of confirmation)

EMAIL: _____

ROOM INFORMATION:

ARRIVAL DATE: _____ DEPARTURE DATE: _____

CHECK ONE:

- KING (1 BED, 1PERSON) DOUBLE/DOUBLE (2 BEDS, 2 PERSONS)
 TRIPLE (2 BEDS, 3 PERSONS) QUAD (2 BEDS, 4 PERSONS)
 ONE BEDROOM SUITE (Upon request only)

Number of Adults _____ Number of Children _____

Occupant Names: _____

Special Requests: _____

ENTER HOTEL CHOICE(S):

1. _____ 2. _____
3. _____ 4. _____

_____ If I can not be placed in any of the above hotel choices, please return form and deposit.

_____ If my first choice is not available, my preference is a hotel with

_____ An inexpensive rate _____ Closer to the Convention Center _____ Adhere to bed type request

PAYMENT INFORMATION

By signing below I am aware that it is at the discretion of the hotel to charge my card the \$200 Deposit in advance for my room request:

American Express Discover MasterCard Visa Other _____

Card Number _____ Exp. Date _____

Name on Card: _____ Signature _____

[] Enclosed is a check for a minimum deposit of \$200.00

ST. LOUIS, MO 2012

HOTEL NAME Please note: Sales Tax is ____ Not included in the room rates	Distance to the America's Center	SINGLE/DOUBLE/ TRIP/QUAD 1, 2, 3 or 4 Persons	SUITE RATE (P+1=Parlor + 1Bedrm)
GENERAL HOTELS			
Crowne Plaza Downtown	5 Blocks	\$136/\$136/\$136/\$136 Sales Tax 15.741%	Available Upon Request
Drury Inn & Suites	Adjacent	\$129/\$129/\$129/\$129 Sales Tax 15.741%	Available Upon Request
Drury Plaza @ the Arch	8 Blocks	\$129/\$129/\$129/\$129 Sales Tax 15.741%	Available Upon Request
Embassy Suites	Across the Street	\$167/\$167/\$167/\$167 Sales Tax 17.741%	Suite Hotel
Holiday Inn Limited Availability	2 Blocks	\$129/\$129/\$129/\$129 Sales Tax 15.741%	Available Upon Request
Renaissance Airport	12 Miles	\$138/\$138/\$138/\$138 Sales Tax 16.175% +0.93 per night	Available Upon Request
Renaissance Grand & Suites Limited Availability	Across the Street	\$154/\$154/\$154/\$154 Sales Tax 17.741%	Available Upon Request
Sheraton City Center	10 Blocks	\$129/\$129/\$129/\$129 Sales Tax 15.741%	Available Upon Request