Froedtert & The Medical College of Wisconsin Invitational

2018 HOTEL REGISTRATION FORM

Welcome to the 2018 Froedtert & The Medical College of Wisconsin Invitational. If your team is staying in a local hotel it is necessary for you to fill out this registration form. We need this information for emergency situations that may arise during the tournament and also to notify you of any changes in tournament schedules.

We also use this is information to track our out of town guests for economic impact studies. Please take several minutes to fill out this registration form to the best of your ability. Your cooperation is greatly appreciated.

Team Name _____

Age Group _____ **Boys/Coed or Girls**

Team Contact _____

Hotel Name _____ **Phone** _____

CIRCLE NIGHTS STAYED	**Friday, May 4th**	**Saturday, May 5th**
Room Number (if known)	**Name Assigned to Room**	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	
_____	_____	