Froedtert & Medical College of Wisconsin Invitational

2019 HOTEL REGISTRATION FORM

Welcome to the 2019 Froedtert & Medical College of Wisconsin Invitational. If your team is staying in a local hotel we'd like for you to fill out this registration form.

We 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 **Room Number** (if known)	**Friday, May 3rd** **Name Assigned to Room**	**Saturday, May 4th**
_____	_____	
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