**AMERICAN LEGION, DEPT. OF LOUISIANA Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2025 MID-WINTER CONFERENCE Conf. #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**January 17th-19th, 2025 (RESERVATION DEADLINE – DECEMBER 1, 2024)**

***\*\*\* ROOMS ARE ASSIGNED BY DATE/ORDER RECEIVED \*\*\****

**MAIL ALL HOUSING FORMS TO: American Legion, Department of Louisiana**

 **P.O. Box 3749 / Baton Rouge, Louisiana 70821**

**GENERAL HOUSING/ROOM RESERVATION**

**NOTES:**

1. **PAYMENT BY CREDIT CARD IS PREFERRED. IF NOT USING CREDIT CARD, A SEPARATE CHECK FOR 1st NIGHT ROOM FEES MUST BE ATTACHED TO THIS RESERVATION FORM.**
2. **ONLY ONE ROOM RESERVED PER FORM.**
3. **CHECK IN TIME IS 4:00 PM**
4. **IF GROUND FLOOR IS REQUIRED, YOU MAY BE MOVED TO AN OVERFLOW HOTEL**

**CONFERENCE HOTEL: AMERICAN LEGION, AUXILIARY & SAL – BEST WESTERN INN OF ALEXANDRIA**

Room Type: \_\_\_\_\_\_\_2 Queen Beds $96 (plus tax) \_\_\_\_\_\_\_\_King $96 (plus tax)

 \_\_\_\_\_\_\_ Suite $110 (plus tax) \_\_\_\_\_\_\_\_\_ Hospitality $165 (plus tax)

**OVERFLOW HOTEL (ONLY IF BEST WESTERN IS FULL)**

\_\_\_\_\_\_2 Queen Beds $96 (plus tax) or \_\_\_\_\_\_King $96 (plus tax)

**If handicapped accommodations are required Describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_ZipCode\_\_\_\_\_\_\_**

**ARRIVAL DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DEPARTURE DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME ON CARD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CARD NO.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EXPIRATION DATE ON CARD:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TYPE OF CARD\_\_\_\_\_\_\_\_\_\_\_\_\_ CHECK # \_\_\_\_\_\_\_\_\_\_\_\_**

**NAMES of ALL ROOM OCCUPANTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME BADGE REGISTRATION: REGISTRATION FEE OF $6.00 PER ATTENDEE MUST ACCOMPANY YOUR HOUSING FORM. REG. FEE MUST BE PAID BY CASH OR CHECK – PAYABLE TO LA DEPT of AMERICAN LEGION**

**NAME FOR BADGES POST/UNIT/SQUADRON #**

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