CUPE BC 55th Annual Convention
Wednesday, April 18 to Saturday, April 21,2018
The Westin Bayshore, Vancouver, BC

Group Delegate Accommodation Form

Register On-Line at www.wetravel.net or www.cupe.bc.ca

Please fully complete one form <u>per Group</u> and fax to W.E. Travel Events Department at (604) 969-5586.
Please dedicate a group leader and fully complete the attached Group Accommodation Request Form
Reservations are processed first received, first served and you will automatically receive a confirmation notice.
DEADLINE FOR RESERVATIONS IS Friday, March 4, 2018.

Group Leader:

Title: _____   First name: _____   Last Name: _____

Union & Local: _____

Address: _____

City: _____   Province: _____   Zip: _____

Phone: _____   Fax: _____   Email: _____

Cheque.   Please forward full amount of your stay (including taxes), along with a note stating *'payment for CUPE BC Annual Convention'* directly to the Hotel at least 30 days prior to check in. The hotel's mailing address will be sent on your Accommodate Confirmation Letter.
OR

Credit Card   Type: _____   Name on card:_____

Credit Card Number: _____   Expiry Date:_____

Please note: The credit card number will be used for guarantee only. If you wish to arrange for pre-billing to a credit card, please request to have a credit card authorization form be sent to you.

Please forward a Credit Card Authorization form.

Security Deposit: All hotels require a credit card at check in for incidentals (i.e. room service, movies, damages etc.). If you do not have one or if you are paying by cash or cheque, you will have to leave a cash deposit of $100 per night, which will be returned upon check-out (providing no services were used).

Main Contact Coordinator for your group (if different from Group Leader):

Title: _____   First name: _____Last Name: _____

Union & Local: _____

Address: _____

City: _____   Province: _____   P/C: _____

Phone: _____   Fax: _____   Email: _____

CUPE BC 55th Annual Convention   Group Accommodation Request Form (page 2)

Union & Local: _____   **Group Leader:** _____

Room #	Delegate	Sharing with	Check-In	Check-Out	Beds
1					1 or 2
Special requests:					
2					1 or 2
Special requests:					
3					1 or 2
Special requests:					
4					1 or 2
Special requests:					
5					1 or 2
Special requests:					
6					1 or 2
Special requests:					
7					1 or 2
Special requests:					
8					1 or 2
Special requests:					
9					1 or 2
Special requests:					
10					1 or 2
Special requests:					
11					1 or 2
Special requests:					

moveUp