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**Conference Services**

**Accommodation Form**

***Personal Information:***

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| **Last Name:** |
| **First Name:** |
| **Gender: Choose an item.** |
| **Phone Number: Cell Number:** |
| **Email Address:** |
| **Address:** |
|  |

***Accommodation Information:***

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| --- |
| **Name of the Group Booking: # 255 - ICE TECH (NOCA Ice Technician Courses)** |
| **Arrival Date:** Click here to enter a date. |
| **Departure Date:** Click here to enter a date. |
| **Roommate Preference:** |

***Credit Card Information:***

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| --- |
| **Credit Card Type:** Choose an item. |
| **Full Name on Credit Card:** |
| **Credit Card Number & Exp.:** |
| **CVC Number (located on the back of your card):** |

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**Signature Date**

**Email completed forms to** [**conferenceservices@laurentian.ca**](mailto:conferenceservices@laurentian.ca) **or fax completed forms to 705-675-6571**