

# USA Hockey 14/16/18 Tier I National Championships Hotel Request Form

**April 2-6, 2014**

Please rank your hotel choices in the space provided. If you prefer to stay in two separate hotels please make a note in the space provided below. Rooms are listed in order of proximity to Cornerstone Community Ice Center. All rooms are non-smoking! All rates are a flat rate, 1-4 people.

Rank	Hotel	Two Bed Rate	Room Type Available	Single Bed Rate	Room Type Available	On-site Catering?
	Airport Settle Inn	\$90	25 Q/Q	\$75	10 Q	No
	Extended Stay Airport	\$85	15 D/D	\$65	10 Q	No
	Radisson Hotel	\$109	5 D/D	\$109	5 K	Yes
	Wingate by Wyndham	\$89	22 D/D			No
	Country Inn – Stadium	\$115	16 Q/Q			No
	Sleep Inn	\$99	37 D/D	\$99	10 K	No
	Sleep Inn	\$114	13 QQ Suite			No
	Fairfield Inn	\$99	10 K w/sofa			No
	Hampton Inn	\$99	5 D/D	\$99	10 K	No
	Comfort Inn	\$89	27 D/D*	\$89	5 K	No
	Aloft Hotel	\$119	35 Q/Q	\$104	30 K	Yes
	Best Western Green Bay Inn	\$110	90 Q/Q	\$99.99	10 K	Yes
	Quality Inn – Lambeau Field	\$91	16 Q/Q			Next Door
	Tundra Lodge	\$129	50 Q/Q			Yes
	Holiday Inn Express	\$109.99	20 Q/Q	\$109.99	2 K	No
	Comfort Suites			\$104.99	11 K w/sofa	Yes
	Quality Inn – Downtown	\$89	48 Q/Q			No
	Country Inn – East	\$99	10 Q/Q			Yes
*	16 w/o fridge; 11 with fridge					

**D/D**- 2 Dbl Beds **Q**- Queen bed **K**- 1 King bed **SOFA**- Sofabed **SUITE**- 2 Dbl beds/Sofabed

**Number of rooms desired for each room type: (indicate how many rooms are needed in each room type)**

Team: _____ Arrival date: _____ _____ single (sleeps up to 2) _____ _____ double (sleeps up to 4) Departure: _____ _____ Quad+ (sleeps up to 6) _____	Family: _____ Arrival date: _____ _____ single (sleeps up to 2) _____ _____ double (sleeps up to 4) Departure: _____ _____ Quad+ (sleeps up to 6) _____
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**Team Contact:**

(Please be sure to list someone who can be reached by phone on Monday morning to confirm block.)

Contact Name \_\_\_\_\_

Team Name \_\_\_\_\_ Age Division \_\_\_\_\_ USAH District \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

E-Mail: **(required for confirmation of receipt of this form )** \_\_\_\_\_

Only reservations submitted via this form will be processed. We will send you an e-mail to confirm we have received this form. If your choice of facility is filled, we will then reserve the facility based on your ranking above.

**Requests will be filled on a first-come, first-served basis.** Please do not contact any of these hotels, as the CVB is coordinating all room reservations. The CVB will email the team contact to provide instructions on making hotel reservations.

**Return this form to:** [patti@greenbay.com](mailto:patti@greenbay.com) or fax to (920) 405-1271

If you have not received confirmation of our receipt of this form, or if you have questions, please call the CVB at 1-888-867-3342.