



call 201-222-1990
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About you...

***First Name:**

***Last Name:**

Title:

Organization/Company:

Address 1:

Address 2:

City:

State/Province:

Zip / Postal Code:

Country:

***E-mail Address:**

***Phone:**

Fax:

Hotel Criteria

Destination/Hotel (First Choice):

Destination/Hotel (Second Choice):

Destination/Hotel (Third Choice):

Meeting or Group Name:

Notes (if you have specs, you can copy/paste them here):

Please indicate the required room block by day.

	Single	Double	Triple	Quad	Suite
Day 1					
Day 2					
Day 3					
Day 4					
Day 5					
Day 6					
Day 7					
Day 8					
Day 9					
Day 10					

Do you require breakfast?

Event Dates (Choose Set Dates or Approximate Dates)

Set Dates:

Preferred Arrival Date:

Alternate Arrival Date:

Number of Nights:

Approximate Dates:

Approximate Time of Year:

Arrival Day:

Number of Nights:

Additional Information

Decision Date:

This event has been held previously.

If held previously, where and when?

What locations are you considering for this event?

*Required fields