



Conference Enquiry Form

Thank you for your enquiry. Please note, this is not an official contract our Conference Event Specialist will provide you with an official contact once the enquiry form has been completed.

 Your Full Name Your Title/Affiliation to Organization

 Organization Name Organization Address

 Phone Number (mobile/cell)

Event name _____

Check-in date _____

Check-out date _____

Preferred Residence Voyageur Place College Quarter

VP only – Number of single/double rooms # Singles _____ # Doubles _____

CQ only – Number of 4 bedroom suites _____

Group or individual payment? Group Individual

Rooming List or individual (online) bookings? Rooming List Individual

Do you require meals at Marquis Culinary Centre (VP requires breakfast for all bookings)? Yes No

Which meals do you require and on what days? _____

Will guests arrive via group transportation or individually? Group Individual

What is the anticipated arrival time? _____

Do you require bus or individual vehicle parking? Bus Individual N/A

Do you require a lounge booking (\$50 per day) and on which days? _____