



Hotel Room Booking Form

First Name: _____ Last Name: _____

Local: _____ Union #: _____ Phone Number: _____

Email Address: _____

Your hotel confirmation will be sent to the email shown on the Member Event Registration Form. If the email address provided is different from what appears in our database, we will update our records accordingly. Please be reminded that OPSEU requires a secure email address that does not belong to your employer.

Hotel Room Booking Form: OPSEU will make hotel reservations on your behalf. Once you receive your reservation confirmation, you must contact the hotel with your credit card information. Members are required to pay their bill upon departure. Ensure that the bill you send with your expense claim indicates zero balance owing.

Please provide the information requested below and return this form together with your registration information to _____ no later than _____.

Arrival Date: _____ Departure Date: _____

Shared Room Request Single Room Request One Bed Two Beds

Please identify who your roommate is, otherwise a single room will be reserved on your behalf.

First Name: _____ Last Name: _____

Local Number: _____ Union Number: _____ Phone Number: _____

Email Address: _____

OPSEU only covers hotel expenses on a shared basis unless you are entitled to a single room. If you require a human rights accommodation, please complete the Human Rights Accommodation Request Form included. (see www.opseu.org/equity-unit for information) .

Number of Children Attending: _____

Please Note: If after registering you are not able to attend, **you must notify _____**. **If sharing, be sure to let your roommate know you have cancelled.** **OPSEU will not find a replacement.** If you do not cancel, any expenses accrued will be billed back to you by OPSEU.