MMUN Conference Package Booking Form

	0 0					
Conference Information						
Location China Conference						
or triple (king + 1 cot be from October 2nd-8th (ed) rooms at Blossom Wat 6 nights and 7 days) – star of Hangzhou, the capital o	ter Museum Hotel fro ting with dinner on (and Hangzhou airports; Hotel ac om October 2nd-8th (6 nights and Oct 2nd, ending with breakfast on ine and culture. Hangzhou is also	7 days); All meals Oct 8th, and A 2-day		
School Information						
School Name						
Contact Person				St MODEL UNIT		
Contact Person's Email Address				DOULTE DOUTE		
# of Registered Participants	Student Delegates	Non-Delegates	Total of Participants	Inspiring youth		
Total # of Rooms Needed				create a better world		
 You MUST use one of the following softworth Standard, Acrobat 8 Professional, or Acrobat 8 Professional, or Acrobat 9 Professional, or Acrobat 9 Property SAVE. Downlots Each form will allow you to book the congroup is greater than 75 or your need for some set of the school must submit only 1 (one) book Each school must submit only 1 (one) book is processed in the set of the set	robat 3D Version 8. IF YOU ad any of these versions for H aference package for a maxim for hotel rooms exceed 25, ple poking form. Multiple forms w f your group is not fully regist must be listed as they apped by beyond the conference date. tes under the corresponding f your computer first, and them	DO NOT USE ONE O FREE at <u>https://get.ado</u> num of 75 participants (pase download another b will only be accepted if l ered on the school dash ar on passport. s, we will be able to offe fields in this form.	DF THE LISTED SOFTWARE, THIS is be.com/reader/ (25 rooms) . If the number of registered booking form from our website. booking request requireu more than 25 board. Ing out this form, please save it on yo	participants in your 5 hotel rooms. as there is availability . ur computer and name		
Email the filled out form to booking@ma NYC Conference, Rome Conference or automatically submit via an email client	Midwest Conference. You Sl	•	• • •			
> The pricing information (IF APPLICABLE) will auto-populate, and will make for an easy and smooth process.						
> Incomplete forms will be returned.						

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Rooming List

Room Count	Room Type	Arrival Date	Departure Date	Guest #1 Guest #2		Guest #3		Guest #4			
		(mm/dd/yy)		First Name	Last Name	First Name	Last Name	First Name	Last Name	First Name	Last Name
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
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21		┨					ļ				
22		┨					ļ				
23		┨					ļ				
24											
25											



onference P	ackage Billing Summary				Hand State
Room Count	Room Type + Number of Occupants	Total Price (6 Nights)	Extra Nights (If Needed)	Total Extra Nights	Total per Room (6 Night Including Extra Night(s (If Needed)
1				=	[
2				=	
3				=	
4				=	
5				=	
6				=	
7				=	
8				=	
9				=	
10				=	
11				=	
12				=	
13				=	
14				=	
15				=	
16				=	
17				=	
18				=	
19				=	
20				=	
21				=	
22				=	
23				=	
24				=	
25				=	

Sum total per room for all rooms in your billing summary and type in the amount on the field 'Approved Charge' on the Credit Card Authorization page.

Grand Total in USD (from page 3)

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redit Card Authorization (up to 3	credit cards)			
Cardholder Name	Credit Card Number	Exp. Date	CVV code	Approved Charge
Billing Address Street (Include street, apartment or su	ite number) City State/ Pro	ovince Zip Code	Country	Total amount in USD
Cardholder Name	Credit Card Number	Exp. Date	CVV code	
				Approved Charge
Billing Address				Total amount in USD
Street (Include street, apartment or su	ite number) City State/ Pro	ovince Zip Code	Country	
Cardholder Name	Credit Card Number	Exp. Date	CVV code	
				Approved Charge
Billing Address Street (Include street, apartment or su	ite number) City State/ Pro	ovince Zip Code	Country	Total amount in USD
Is there any additional inform	ation you would like to share with th	e MMUN booking tea	m?	