

National Guard Association of Texas Conference Hospitality Suite Request Form

Planning to host a Hospitality Suite during the 66th Annual NGAT Conference? Now is the time to make your reservation. Do not delay! Only a limited number of suites are available, and they are going fast. To make a reservation, complete the form below and send it to NGAT with your deposit of \$100.00. Deposits must be received by NGAT no later than *March 10, 2025*. The hospitality night will only be for one night, but rooms can be reserved

for Fri & Saturday night if indicated on the form.

Suite: Suites

Rate: \$149 per night plus applicable taxes

\$149 per night plus applicable taxes for a connecting room.

Contact NGAT for information about the suites that are available.

Hospitality Suite Rules

- Hospitality suites are available on a first-come, first-served basis.
- NGAT will contact you to discuss your assignment after receiving the Hospitality Reservation form.
- Food and alcoholic beverages may be taken into the suite, provided it is done discretely.
- At minimum, two (2) hospitality suite hosts must be TABC certified.
- There can be no printed invitations or handout material about the Hospitality suites.
- ALL food and beverages must be contained and consumed within the suite.
- Food and beverages may also be ordered through the hotel catering department at your expense.
- NO live bands or DJs in the suites
- The hospitality suite check-in time is 3 pm on Friday, March 28, 2025.

(Please type or print)

| Unit: | | POC: | |
|--|------------------|-------------|--------------------------------------|
| Street Address: | | | |
| City: | | State: | Zip: |
| Cell Phone: | | Work Phone: | |
| Email Address: | | | |
| No I do not want a connecting room Yes I do want a connecting room | | | |
| Select Date Preference: (Please check Option) | | | |
| Only Friday, March 28 | Only Saturday, M | Iarch 29 | Both Friday and Saturday March 28-29 |

To pay by credit card complete the below information.

Your \$100 deposit will show as a credit for your room upon your arrival.

| Please Check Payment Method ☐ Check ☐ Money Order ☐ Mastercard ☐ Visa Name of the Card Holder: | | | |
|--|--|--|--|
| Card Number: | | | |
| Billing Address Zip Code: Signature of Cardholder: | | | |
| ☐ Please charge my card the \$100 Hospitality Room Deposit. | | | |
| □ Please charge my card \$ to pay for my Hospitality Room | | | |
| (A 5% credit card fee will be applied to all credit card payments) | | | |
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