

MASC Hotel Reservation Form



Date

Hotel Requested – Choose one from the list at bottom of this form

Client Name

Client Organization / School Name

Client Information

Work Phone

Cell Phone

Email Address

Address

City

State

ZIP Code

Arrival Date

Departure Date

Number of Rooms

State Tax Exempt Number (if applicable)

Credit Card Authorization Needed? (Yes/No)

Invoice Needed? (Yes/No)

Please submit this completed form to one of these hotels:

- 1. Doubletree by Hilton Ocean City Oceanfront / 2. Hilton Ocean City Oceanfront Suites**

Lara Meadows lmeadows@harrisingp.com 410-289-1470 or

Renee Seiden rseiden@harrisingp.com 410-520-0107

- 3. Aloft Hotel Ocean City / 4. SeaLoft Hotel Ocean City**

Wajih Allam wajih.allam@aloftoceancity.com 443-373-0814

Madelyn Wise Madelyn.wise@aloftoceancity.com 443-373-0807

This completed registration form will prompt the hotel to continue your registration process. Upon receipt of this completed form, the hotel will send you:

- A credit card authorization form for the first night's deposit
- A Rooming List template for you to complete and submit back to the hotel to confirm your rooms
- A request for you to submit a copy of your state tax exempt form to your selected hotel