

INACSL EXHIBITOR HOUSING SUB-BLOCK

This form is required to request a block of <u>10 or more</u> hotel rooms. INACSL PRE-APPROVAL IS REQUIRED TO RESERVE A SUB-BLOCK.

PART I: ROOM BLOCK REQUEST & HOTEL

INSTRUCTIONS: Fill in the <u>total</u> number of rooms requested each night, by room type. The check-out date is notconsidered a night stayed.

| Date | Mon | Tues | Wed | Thurs | Fri | Sat |
|---|--------------|---------------|---|----------------|-----------------|----------------|
| Date | June 11 | June 12 | June 13 | June 14 | June 15 | June 16 |
| of King Rooms Requested | | | | | | |
| of Double Bed Rooms Requested | b | | | | | |
| tal Room Nights Requested = | | | | | | |
| Please note, selecting your room ailability upon check-in. | preference d | oes not guara | intee you will | receive your p | oreference. Ro | ooms are su |
| Hotels | | | INACSL Discounted Rate (exclusive of taxes and fees | | | |
| Raleigh Marriott City Center | | | \$204 | | | |
| Sheraton Raleigh Hotel | | | \$195 | | | |
| Residence Inn Raleigh Downtown | | | King: \$194; Queen/Queen: \$202 | | | |
| Choice Hotel = Choice Hotel = Please note, INACSL will do their on rooms available. | | | | | re subject to d | availability i |
| ART II: CONTACT INFORMATION | AND ACCEP | TANCE | | | | |
| | | | | | | |
| nme of Company or Organization: | - | | | | | |
| nme of Company or Organization: | | | | | | |

City:______ State: _____Zip: _____

Contact Email Address:______ Phone #: ______

PART III: SUB-BLOCK POLICIES

Rooms Attrition: Changing circumstances may indicate a need to reduce the guest room block. A contracting company may reduce the guest room block without penalty, up to 10% of the total room nights, prior to the sub-block deadline of Friday, April 26, 2024, 5:00 PM CT. The number of room nights as of the sub-block deadline date is your final guarantee room night total. Should the actual room nights utilized be less than the 90% of the total final guarantee (defined as the original blocked room nights minus any room nights released prior to the sub-block deadline), the contracting company agrees to pay for the number of sleeping rooms nights not utilized up to 90% of the total room nights.

EXAMPLE: ABC Inc. contracts for 20 room nights. Prior to the sub-block deadline date, ABC Inc. reduces their block to 18 room nights (10% maximum reduction). If only 15 room nights are utilized, ABC Inc. is liable to pay for 3 room nights not utilized.

20 room nights – Original contract 18 room nights – Final guarantee <u>15 room nights – Utilized</u> 3 room nights – Variance

3 rooms x \$204 group rate = \$612+ taxes owed to INACSL

Room Assignment Date: All the individual room occupants' names will be due to the hotel by Wednesday, May 1, 2024, 5:00 PM CT. Be sure to refer to your company name to ensure that the names on your list are correctly attributed to your block of rooms. When your block is reserved with names, an acknowledgement will be sent from the hotel detailing each of the reservations.

All Unassigned rooms will be released for resale on Friday, May 3, 2024, 8:00 AM CT.

PART IV: ACCEPTANCE AND SIGNATURE

<u>PLEASE NOTE:</u> A valid credit card may be required to reserve your block. All credit card processing will be held until check-out, or to apply any no show or cancel fees that are associated with your rooms that do not provide their own card.

Once this form is approved, you will work directly with the respective hotel to submit your rooming list and provide credit card information to secure your reservations.

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| for each ; as each |
| |

REMINDER: By signing the above, this signifies your company agrees to the sub-block procedure and policies listed within this document.