

# ALCORN STATE UNIVERSITY

## Summer Conference Housing Reservation Request Form

**Camp/Conference:** \_\_\_\_\_

**Department sponsoring camp/conference:** \_\_\_\_\_

**Director/Sponsor:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Camp Category** (check all that apply)

Academic \_\_\_ Educational \_\_\_ Recreational \_\_\_ Religious \_\_\_ Sport \_\_\_

**Staff** Check-In Date: \_\_\_\_\_ Time: \_\_\_\_\_ Check-out date: \_\_\_\_\_ Time: \_\_\_\_\_

**Camp** Check-In Date: \_\_\_\_\_ Time: \_\_\_\_\_ Check-out date: \_\_\_\_\_ Time: \_\_\_\_\_

**Expected # of Participants:**

Males \_\_\_\_\_ Females \_\_\_\_\_ Total \_\_\_\_\_

Male Counselors \_\_\_\_\_ Female Counselors \_\_\_\_\_ Total \_\_\_\_\_

**Requested Rooms:**

# of Double rooms requested: Male \_\_\_\_\_ Female \_\_\_\_\_ Total \_\_\_\_\_

# of Single rooms requested: Male \_\_\_\_\_ Female \_\_\_\_\_ Total \_\_\_\_\_

**Housing Spaces (TBD)**

Will anyone from your group have special accommodation needs?

Yes  No  Unsure

Will your group require on-campus parking?

Yes  No  Unsure

**Payment Information:**

PO # \_\_\_\_\_

Check # \_\_\_\_\_

**Outside camps/conferences are required to have an Alcorn State University Sponsor (Department) to host their group in university facilities.**

**Department Sponsor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Note:** Please submit request form to [housing@alcorn.edu](mailto:housing@alcorn.edu).