

**MTTA SUMMER CONFERENCE
SPEAKER LODGING REQUEST**

Note: Rooms for presenters will be considered for reimbursement from MTTA monies as available.

Cluster/Program Area _____

Program Planner Making Request (Name) _____

Program Planner Telephone Numbers(Work) _____ (Home) _____

Speaker Name (Mr., Ms, Dr, etc.) _____

Company Name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Telephone (Daytime) _____

Email _____

Date(s) Requesting Accommodations _____

Type of Accommodations Needed (Single, Double, King) _____

Additional Information/Special Needs Request (IE. Smoking/Non-smoking; late arrival)

Items to consider for comp rooms: schedule minimal nights, consider travel time; if presenting for company and selling a product, MTTA does not typically comp rooms.

For MTTA Board Use Only
Hotel Confirmation Number
Confirmation Contact Person
Conformation Date

PROGRAM PRESENTER INTRODUCTION INFORMATION