



CONVENTION AND VISITORS BUREAU
CUMBERLAND COUNTY, NC

Hotel Reservation Form

Name of Event: _____

Team Name: _____

Contact Name: _____

Contact Address: _____

City/State/Zip Code: _____

Contact Phone No.: _____

Email Address: _____

Host Hotel Selection* (Please Circle At Least (2) Options)

Ramada Inn - \$89.00	1 st Choice	2 nd Choice	3 rd Choice
Courtyard by Marriott - \$120.00	1st Choice	2nd Choice	3rd Choice
Holiday Inn I-95 - \$120.00	1st Choice	2nd Choice	3rd Choice
Comfort Inn – from \$119.00	1st Choice	2nd Choice	3rd Choice
Wingate by Windham - \$116.00	1st Choice	2nd Choice	3rd Choice
Embassy Suites – from \$184.00	1st Choice	2nd Choice	3rd Choice
Homewood Suites – from \$139.00	1st Choice	2nd Choice	3rd Choice
Springhill Suites - from \$159.00	1st Choice	2nd Choice	3rd Choice

* Hotel Selection choices are based on availability on the hotel chosen. All efforts will be made to secure your 1st or 2nd choice hotel selection.

Date of Arrival: _____ Date of Check-Out: _____

Number of Rooms Needed: _____

Room Type: _____

** Rooming list will need to be forwarded no later than two weeks prior to arrival. **

RETURN RESERVATION FORM TO:

sdecatu@visitfayettevillenc.com or via fax at 910.484.6632

Reservations will be made within 48 hours of receipt of reservation form. Please complete all information in the above form. Should you have any questions, contact Stephanie Decatur at 910.835.5089 (M-F 7:00am-4:00pm) or via email at sdecatu@visitfayettevillenc.com