

CALIFORNIA GRAND ASSEMBLY  
**2019 HOUSING 101:**

**1**

## SELECT RESERVATION METHOD

by following the **link below** or filling out the **attached form**.

<https://book.passkey.com/e/49790640>

**2**

## COMPLETE YOUR RESERVATION.

As you book each hotel room (1 at a time) please make sure to:

- list **ALL** room occupants
- fill in the **Mother Advisor & Assembly Name** sections
- in the **Additional Requests** section ask that all Assembly Rooms be placed on the same floor near each other, see *example text below*

*"Please place all 8 of San Jose Assembly's rooms on the same floor near each other."*

**3**

## PAYMENT

Each hotel has their own payment policies. We recommend payments be made by credit or debit card.

**REMINDERS:** *All Youth Protection Policies & Guidelines apply.  
Please take note that each hotel has their own cancellation policy.*

*questions?*

Contact the Greater Ontario Convention & Visitors Bureau at  
[housing@ontariocc.org](mailto:housing@ontariocc.org) or (888) 262-7116.



**OFFICIAL HOUSING FORM**  
**International Order of the Rainbow Girls**

April 4 – 9, 2019

Ontario, California

**Book your reservation by mailing or Faxing this form see address below or Book online using this reservation link :**

<https://book.passkey.com/e/49790640>

**Mail to:**

Greater Ontario Convention & Visitors Bureau  
 Housing Department  
 2000 E Convention Center Way  
 Ontario, CA 91764

OR

Phone: 888-262-7116  
 Fax: 909-937-3070  
 E-mail: [housing@ontariocc.org](mailto:housing@ontariocc.org)

1. If mailing or faxing the official housing form please submit one request form per room.
2. Indicate hotel preference note: 1st, 2nd and 3rd options (must be alternate hotel).
3. Room assignments will be made in order received.
4. Fill in arrival and departure dates.
5. List all names of occupants of room. (Required if requesting double).
6. Supplying email will expedite your acknowledgement from the housing department.
7. Deadline for reservations is **March 1, 2019**.
8. Changes /cancellations, prior to **March 1, 2019**, must be in writing (fax or email accepted).
9. A cancellation fee will apply if you do not give the required notice to the hotel. Please contact the hotel directly if you are canceling after the cutoff date, **March 1, 2019**.

NAME \_\_\_\_\_

ASSEMBLY NAME \_\_\_\_\_ FIRST \_\_\_\_\_ LAST \_\_\_\_\_ M.I. \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

E-MAIL \_\_\_\_\_

Hotel Requested (upon availability): ALL LISTED RATES ARE PER NIGHT AND DO NOT INCLUDE TAX

- |                                                                  |                                          |                                                                     |
|------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> ONTARIO GATEWAY HOTEL (inside hallway)  | <input type="checkbox"/> King \$99       | <input type="checkbox"/> Two Doubles \$99                           |
| <input type="checkbox"/> AZURE HOTEL AND SUITES (inside hallway) | <input type="checkbox"/> King \$109      | <input type="checkbox"/> Two Queen \$119                            |
| <input type="checkbox"/> QUALITY INN ONTARIO (inside/outside)    | <input type="checkbox"/> King \$109      | <input type="checkbox"/> Two Queen \$109                            |
| <input type="checkbox"/> SHERATON (inside hallway)               | <input type="checkbox"/> King \$129      | <input type="checkbox"/> Two Doubles \$129 (+\$10 for triples/Quad) |
| <input type="checkbox"/> HOLIDAY INN (inside hallway)            | <input type="checkbox"/> Two Queen \$129 |                                                                     |
| <input type="checkbox"/> BEST WESTERN (outside)                  | <input type="checkbox"/> Two Queen \$119 |                                                                     |

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

List all Occupant(s) of Room: (1.) \_\_\_\_\_ (2.) \_\_\_\_\_

(3.) \_\_\_\_\_ (4.) \_\_\_\_\_

MOTHER ADVISOR \_\_\_\_\_ PERSON IN CHARGE \_\_\_\_\_

Special Requests:  Handicap Accessible  Wheelchair access  Other \_\_\_\_\_

**Method of Payment** Reservations must be guaranteed by a one night's deposit and tax.

**Credit Card Information:**

American Express     Discover     MasterCard     Visa

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Card Holder Name: (Print as it appears on card): \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_