International Association of Chiefs of Police 121st Annual Conference

Orlando Convention Center – Orlando, FL Embassy Suites – 8978 International Drive, Orlando, FL October 25th – 28th, 2014

AACOP						
IACP Conference Housing Request Form						
Reservation Information: Occupant Name(s):						
Please Provide ALL Names Incl	uding Spouse	if attending:				
Company/Delegation Name:						
Address:						
City, State, Zip Code:						
Phone:	Fax:		E-Mail:			
Housing Information (please fill out completely):						
Embassy Suites		Triple \$225,		gle/Double 2 Bedded \$215, tax \$12.5% + Other)		
Arrival Date:		Departure Da	te			
Room Type (circle one): Single (1 Person, 1 Bed) Double (2 People, 1 Bed) Twin (1 or 2 People, 2 Beds) Triple (3 people, 2 beds) Quad (4 people, 2 beds)						
Special Requests: Smoking	No	on Smoking_	_ Handicapped_			
Guarantee Information: Please Check One: Credit Card Check (payable to Travel Planners, Inc in US funds)						
Name of Cardholder:	_ creare cura		(payable to Travel Frami	ers, me in 05 rands)		
Credit Card Type (circle one):	Visa	Mastercard	American Express	Discover		
Credit Card Number:						
3 / 4 digit code			tion Date:			
Please Complete Entire Form and Return no later than Monday, July 25 th , 2014						
EMAIL:						
aacop@aacop.com						
Adrian Bramblett						
334-207-2712						
Joe Roy						

334-730-8065