# 2024 HOSA STATE CONFERENCE HOUSING INFORMATION \& RESERVATIONS FORM 

Chula Vista Resort, Wisconsin Dells

## General Information

Email lodging form to groupreservations@chulavistaresort.com with a read receipt attached. Please DO NOT fax your reservation(s) and do not call the resort to make reservations, email only.

Room reservations must be made by March 28th, 2024. The room block will be closed on that day.
Rooms will be assigned on a first come, first serve basis.
You will need to provide a credit card to hold your reservation (cards will only be charged when a credit card authorization has been received). Districts can submit a purchase order in place of a credit card guarantee. Tax Exempt Forms MUST be provided with emailed registration. Please do not bring tax exempt certificate to the hotel front desk at check in. Rooms will remain taxable until proof of tax exempt is received.
Check-in time starts at 4 p.m. and check-out time is by 10:30 a.m. Room keys will be available at the conference registration site, not the front desk. More information will follow.

Luggage storage will be available.
All rooms have a microwave, coffee maker, and small refrigerator.
Everyone staying at the hotel will have access to the waterpark when HOSA general sessions are not in progress. No extra charges beyond room costs for waterpark access.
Small towels will be provided at the waterpark, but you are welcome to bring your own larger towel. Do not take towels from the sleeping rooms.
This is a self-contained event; all conference activities will take place on the Chula Vista grounds.
Please use the housing form to register your bus driver if he/she is going to be staying onsite. Also indicate if your chapter or the bus company will be paying for the room.
Please indicate whether an attendee is an adult/chaperone or a student.
For chapters COMBINING housing, only ONE chapter should submit the hotel reservation form and submit payment. List all people in the room. Work out the finances between your chapters.
Efforts will be made to keep chapter rooms together. However, not all room types are in the same location. Some chapter rooms may be located in different areas of the hotel.
All school districts are expected to provide supervision for their students. In the event of an emergency or other need to find advisors or students, please sign the bottom of the reservation form to give permission for Christina Patrin, State Advisor, to have room numbers of your delegates.

Housing confirmation will be received via email by late March. If you do not receive confirmation of reservation(s) call Renata at 608-254-1625.

For more information on Chula Vista or for more specific room information, check out their website at www.chulavistaresort.com/plan-explore/rooms-reservations.

Continued to the next page.

## Room Type

Double Queen

## Description

Up to 4 people; room has 2 queen beds

King Tower

Queen Junior Suite (1 bedroom)

Fairway Villa

2 Bedroom Condo

3 Bedroom Condo
Up to 2 people; room has 1 king bed with 1 sofa sleeper

Up to 6 people; only 1 bathroom, and 1 bedroom room has 2 queen beds and 1 sofa sleeper

Up to 6 people; only 1 bathroom, and 1 bedroom room has 2 queen beds and 1 sofa sleeper.

Includes kitchenette.
Located on golf course

Bedroom Condo

Up to 14 people; room has 1 king bedroom with private bath, 1 bedroom with 2 queen beds and a sofa sleeper in the living area. One bathroom off of the living area, a full kitchen \& living area as well as a Jacuzzi.
A junior suite is added to the 2-bedroom condo to make the third bedroom on this room. There are 2 queen beds and one queen sleeper as well as a third bathroom in this unit.

## Price/night

\$100 - Single
\$120 - Double
\$140 - 3-4 People

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\$100 - Single
\$120 - Double
\$140 - 3-6 People
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\$100 - Single
\$120 - Double
\$140 - 3-6 People
\$100 - Single
\$120 - Double
\$140 - 3-4 People
\$250 - 1 to 8 people
\$380 - 1 to 14 people

## OFFICIAL SLC HOTEL RESERVATION FORM

INSTRUCTIONS:
This form must be completed and emailed to the Chula Vista Resort by March 28th, 2024. Please email this form to groupreservations@chulavistaresort.com along with your school district tax exempt certificate.

Chapter Name: $\qquad$ Primary Advisor: $\qquad$
School District: $\qquad$ Address: $\qquad$
Phone (with area code): $\qquad$ City: $\qquad$ Zip Code: $\qquad$
Email: $\qquad$
Tax Exempt Number: $\qquad$ ***must also provide tax exempt form***

Paying with (check one):
Credit Card (complete credit card authorization form sent with confirmation email)


Purchase Order (send a copy of the purchase order after receipt of confirmation email)


Check (send a check after you receive confirmation email for total due). Do NOT send a check until you have confirmation and know the total amount of the bill.

Arrival Date: $\qquad$ Departure Date: $\qquad$ Estimated Arrival Time: $\qquad$

## Room Types:

Double Queen or King Tower Queen Jr Suite or King Jr Suite Fairway Villa
2 Bedroom Condo
3 Bedroom Condo

## Price per Night

$\$ 100$ for 1 person; $\$ 120$ for 2 people; $\$ 140$ for 3-4 people $\$ 100$ for 1 person; $\$ 120$ for 2 people; $\$ 140$ for 3-6 people $\$ 100$ for 1 person, $\$ 120$ for 2 people, $\$ 140$ for 3-6 people $\$ 250$ for 1 to 8 people $\$ 380$ for 1 to 14 people

Please provide first and last names of students \& advisors/chaperones. Be sure to mark whether the room has students or adults staying in it.

| Room 1 Student $\square$ Adult | Room 2 Student $\square$ Adult | Room 3 Student $\square$ Adult |
| :---: | :---: | :---: |
| Type of Room: | Type of Room: | Type of Room: |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |

## OFFICIAL SLC HOTEL RESERVATION FORM <br> Continued

Chapter Name: $\qquad$ Primary Advisor: $\qquad$
Please provide first and last names of students \& advisors/chaperones. Be sure to mark whether the room has students or adults staying in it.

| Room 4-Student $\square$ Adult | Room 5-Student $\square$ Adult | Room 6-Student $\square$ Adult $\square$ |
| :---: | :---: | :---: |
| Type of Room: | Type of Room: | Type of Room: |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |
| 7 | 7 | 7 |
| 8 | 8 | 8 |
| 9 | 9 | 9 |
| 10 | 10 | 10 |
| 11 | 11 | 11 |
| 12 | 12 | 12 |
| 13 | 13 | 13 |
| 14 | 14 | 14 |

## Special Requests:

All school districts are expected to provide supervision for their students. In the event of an emergency or other need to find advisors or students, please sign if you give permission for Christina Patrin, State Advisor, to have room numbers for all your delegates.

Signature of Advisor: $\qquad$

Copy this form if additional rooms are needed.

