



Guestroom Reservation Request Form – Federal Per Diem Rate
33rd Annual NASBITE International Conference & National Small Business Exporter Summit
March 24-27, 2020 ~ Graduate Hotel Annapolis ~ Annapolis, Maryland
 Please complete and submit to diane.schafer@nasbite.org

Registrant Name:			
Organization:			
Address:			
City, State, Zip:			
Office Phone #:		E-mail:	

Arrival Date:			
Departure Date:			
Special Requests: (King/DbI, etc.) <i>NOTE: Request Only</i>			

PAYMENT INFORMATION

FOR USE IN GUARANTEEING YOUR FIRST NIGHT'S RESERVATION ONLY.

A CREDIT CARD WILL BE REQUIRED UPON CHECK-IN.

Provide the following information for a valid VISA, MasterCard or American Express card account:

Card #:	Expiration Date:
Billing Address:	
Name on Card:	Signature:

Return payment & completed form to NASBITE at:

9 Newport Dr., Suite 200, Forest Hill, MD 21050 Fax: 443-640-1031 or e-mail: diane.schafer@nasbite.org