

# STATE TOURNAMENT HOTEL/MOTEL ROOMING INFORMATION 2009-2010 VOLLEYBALL

SCHOOL: \_\_\_\_\_ HEAD COACH: \_\_\_\_\_

CHECK IN DAY/DATE: \_\_\_\_\_ CHECK IN TIME: \_\_\_\_\_ a.m. p.m.

CHECK OUT DAY/DATE: \_\_\_\_\_ CHECK OUT TIME: \_\_\_\_\_ a.m. p.m.

**PLEASE NOTE: Teams must notify the motel no later than Friday, 11:00 a.m. if the departure time is different than indicated above.**

NOTE: Please fill in athletes/coaches names and hotel/motel management will assign room numbers.

ROOM # _____	ROOM # _____	ROOM # _____	ROOM # _____
1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____

ROOM # _____	ROOM # _____	ROOM # _____	ROOM # _____
1. _____	1. _____	1. _____	1. _____
2. _____	2. _____	2. _____	2. _____
3. _____	3. _____	3. _____	3. _____
4. _____	4. _____	4. _____	4. _____

ROOM # _____	ROOM # _____	ROOM # _____
1. _____	1. _____	1. _____
2. _____	2. _____	2. _____
3. _____	3. _____	3. _____
4. _____	4. _____	4. _____

Please fax form prior to November 16 to: Motel: \_\_\_\_\_ Days Inn \_\_\_\_\_  
 Contact person(s): Pauline Kratz Fax Number: 605-692-5807

**THE SDHSAA WILL RESERVE 11 ROOMS PER QUALIFYING SCHOOL FOR THIS TOURNAMENT.**

SHOULD YOU REQUIRE MORE ROOMS, IT IS YOUR RESPONSIBILITY TO  
 CONTACT: Pauline Kratz at (605) 692-9471.