



Conference/Accommodation Request Form

Conferences, Meetings and Special Events

Contact Information

Name of Organization _____

Business Category (select one) Academic Non-Profit Student Other (specify) _____

Salutation Mr. Mrs. Ms Dr.

First Name _____ Last Name _____

Title _____

3rd Party Organization (if applicable) _____

Address _____

City _____ Province/State _____ Postal/Zip Code _____

Country _____ Telephone _____ Fax _____

Email _____

Website URL _____

Do you have a local host in Winnipeg or Canada yes no

How would you like us to respond phone fax email

How did you hear about us? _____

Meeting/Event Information

Name of Meeting/Event _____

Preferred Dates _____

Total Attendance _____ Number of guestrooms required _____

Preferred accommodation type suite traditional dormitory

Have you had this meeting at the University of Manitoba before? no yes

if yes, when? _____

Largest meeting room setup and attendance (e.g. classroom for 100 people) _____

Breakout rooms required _____

Amount of exhibit space required (sq. feet or number of exhibits) _____

Special needs (please specify) _____

List catering and meal service requirements

Thank you for considering the University of Manitoba for your upcoming meeting/event.

One of our sales staff will contact you within 3 business days.

Please fax the form to (204) 474-7569

or fill it in, save a copy and email it to ccs@umanitoba.ca