**Delta by Marriott Edmonton South**

**Rooming List**

**for**

**CANADA JUNIOR INTERNATIONAL Open 2019**

|  |  |  |
| --- | --- | --- |
| **National Association** |  | |
| **Contact person** |  | |
| Fax | ( ) | e-Mail: |
| **Mobile Phone** | ( ) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Room No. | **Names of persons staying in the same room - Rooming List** | | |  |
| Person 1 | Person 2 | Person 3 | Person 4 |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** |  |  |  |  |
| **9** |  |  |  |  |
| **10** |  |  |  |  |
| **11** |  |  |  |  |
| **12** |  |  |  |  |

> The rooming list must follow the Hotel Reservation Form and **must** be returned to

**DELTA by MARRIOTT EDMONTON SOUTH** not later than **February 15, 2019**

|  |
| --- |
| > Please fill in and fax / e-mail or send this accreditation to:  Fax +001 403.297-2706  Email: [apang@badmintonalberta.ca](mailto:apang@badmintonalberta.ca) |