

## 2024 Adult 18 & Over League State Championships Hotel Information Survey

Captains: Please fill this out in advance and turn it in at the Captains Registration.

CTA/Local League:

Number of Players on your Roster:			Captain's Cell #:				
				(Choose all that apply for each person)			
<u>Hotel Name</u>	<u>Na</u>	me on the reserva	ation	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>

Hotel Partners (please look on the hotel information page of the Captains Packet for hotel rates and offers)

Courtyard by Marriott - Rome	Quality Inn - Rome				
Country Inn & Suites	Holiday In Express & Suites - Cartersville				
Days Inn	Courtyard by Marriott - Cartersville				
Fairfield Inn & Suites Rome	Comfort Inn & Suites - Cartersville				
Hampton Inn & Suites	Comfort Inn & Suites - Calhoun				
Holiday Inn Express & Suites	Hampton Inn - Adairsville				



Team Captain Name:



<sup>\*\*</sup>If the captain is making the room reservations in their name and having the players change them when they arrive at the tournament, please make sure this form reflects your changes when you turn it in at check in.