



Council on Law Enforcement Education and Training
 2401 Egypt Road, Ada, Oklahoma 74820-0669
 Phone: (405) 239-5100 Fax: (405) 239-5180
<http://www.cleet.ok.gov/>

Request for Lodging Reservation

Date of Request: _____

Agency: _____

Contact Name (Print or Type): _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Alternate Number: _____

E-mail address: _____ Fax Number: _____

Attendee if different than Contact name: _____

School or Event Name: ADJUNCT INSTRUCTOR - _____

Attendee Phone Number: _____ E-mail address: _____

Arrival Date: _____ Time: _____ Number nights lodging: _____

Departure Date: _____ Time: _____

Fees: (Authority OAC 390:55-1-11)

| Check Reservation Request | Facility Name | Room # | Capacities | Restrictions | Rental Fee One/Half day or less | Rental Fee Full Day | Number of Days |
|---------------------------|--------------------------------|--------|-------------------------------|--------------|---------------------------------|---------------------|-----------------|
| | Lodging per bed | | | | | N/C | |
| | Item | | | | | Cost per Item | Number of Items |
| | Lost room key or magnetic card | | | | | \$10.00 | |
| | Lost food service card | | Payable to cafeteria provider | | | \$2.00 | |

Payment Type:
 Cash Business Check Money Order Cashier's Check Bank Certified Check Other

AGREEMENT

In making this request to lodge at the K.O. Rayburn Training Center, the undersigned agrees to:

1. Comply to the Academy's rules, regulations and guidelines while attending, teaching or coordinating the usage; and
2. Agree to pay incurred charges.

Signature: _____ Date: _____

CLEET Use Only:

| Approved By: | Date Approved | Rate | Room Assigned | Date Confirmed |
|--------------|---------------|------|---------------|----------------|
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