**GUEST INFORMATION FORM**

**EVENT NAME & DATE:**

**SPONSORING GROUP/DEPT:**

**VISIT DATE (S):**

***Basic Information (Please complete all fields below)***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **NAME:** |  | | | | |  | | **TITLE:** |  | | | | |
| **EMPLOYER/AFFILIATION:** |  | | | | | | | | | | | | |
| **ADDRESS for REIMBURSEMENT:** |  | | | | | | | | | | | | |
| **HOME ADDRESS:** |  | | | | | | | | | | | | |
| **OFFICE PHONE:** |  | | |  | **CELL:** | |  | | |  | **OTHER:** | |  |
| **EMAIL:** |  | | | | | | | | | | | | |
| **U.S. CITIZEN:** |  | **YES** |  | **NO** | |  | | **VISA STATUS\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | |  | |
|  |  |  | |  | | |

***Travel Information (if known)  
Please note that a copy of your travel folio showing payment is REQUIRED for reimbursement***

|  |  |  |  |
| --- | --- | --- | --- |
| **ARRIVAL DATE:** |  | **ARRIVAL TIME:** |  |
| **AIRLINE:** |  | **FLIGHT #:** |  |
| **DEPARTURE DATE:** |  | **DEPARTURE TIME:** |  |
| **AIRLINE:** |  | **FLIGHT #:** |  |

***If you have any questions, please feel free to contact STAFF NAME via email at EMAIL or by phone at PHONE NUMBER.***