



# ROOMING LIST

Registration Number:

Church:

Contact:

Rooming List:

 OF 

*Print additional copies as needed. Keep a copy for your files. Your registration number is required for accurate room assignments.*

**Mail or Fax with deposit & release form to:**

**Return by Mail:**

Jubilee Conferences  
P.O. Box 2034  
Woodstock, GA 30188

**Return by Fax:**

770-592-8239

ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4
ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4
ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4
ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4
ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4
ROOM #	_____	
	GUEST #1	GUEST #2
	_____	_____
	GUEST #3	GUEST #4

