



THE UNIVERSITY of
MISSISSIPPI
STUDENT HOUSING

**CAMP & CONFERENCE HOUSING
RESERVATION REQUEST**

General Information

Name of Camp/Conference:

Group Purpose:

Estimated number (participants & staff): Male: Female:

Type and number of **BEDS** requested: Double: Single:

Indicate your preference for the following:

Check-In date:

Check-In time:

Check-Out date:

Check-Out time:

Do you have individuals in your camp/conference with special housing needs?

If yes, please provide additional information:

Group Sponsor/Contact

Primary Contact:

Address:

City/State/Zip Code:

Office Phone:

Cell Phone:

Fax:

E-mail:

Secondary Contact:

Office Phone:

Cell Phone:

Number to call for on-site emergencies:

Group Age (check all that apply):

Elementary School

College

Middle/Junior School

Adult

High School

Payment Information

Ole Miss Account #

Cash

Check #