

**2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-13
HOUSING FORM
On-Site Headquarters Hotel**

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

DoubleTree by Hilton Virginia Beach

1900 Pavilion Drive

Virginia Beach, VA 23451

Telephone: (757) 422-8900

FAX: (757) 422-0039

Email: dgordy@doubletreevb.com

Housing Form Deadline Feb 15.

HOUSING FORM MUST BE FAXED OR MAILED OR EMAILED NO LATER THAN THE ABOVE DATE
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

1. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. The first night's room and tax (per room) is required to confirm reservations.

<input type="checkbox"/> Check enclosed	Check amount:	\$		or credit card information:	
Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

All room types are available at the following rate:

\$145.00 plus 15% sales tax and \$2.00 per room occupancy tax for inclusive rate of **\$168.75** per room.

NOTE POLICY: Three-night minimum stay required. Any reservation not canceled within **7 days** of arrival will be charged one night's room and tax. (This change is approved by Virginia FCCLA due to large number of last-minute room cancellations preventing use of room by other schools on waiting list.)

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: Due to limitations in numbers of rooms with two beds, **any room reservation for only two people will be placed in room with one king bed.** Quad rooms will be assigned on a first registration received basis. **No roll-aways are available.**

Bus Parking: Is available at the hotel. Indicate the number of buses: _____

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGES 1 & 2 of this form directly to the hotel by the Feb. 15 deadline. Keep a copy for your records.

2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14
HOUSING FORM – page 1
Off-Site Oceanfront Hotel – (can sleep up to six in doubles suite)

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

Comfort Suites Beachfront

2321 Atlantic Ave

Virginia Beach, VA 23451

Telephone: (757) 491-2400 or (757) 407-4509

Email: sales@pashmglobal.com

HOUSING FORM MUST BE EMAILED BY **FEBRUARY 15**
 TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

2. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. Deposit due at least three days prior to arrival. Please complete the information below in order to receive guest room confirmation numbers. Two night (Friday & Saturday) minimum stay required.

<input type="checkbox"/> Check enclosed	Check amount:	\$		or credit card information:	
Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

Suites are available at the following rate:

\$137 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$159.55** per room.

Note: Doubles Suites have two double beds plus a sleeper sofa in the separate living/kitchen area; can sleep up to six.

King Suites have a king bed plus a sleeper sofa in the separate living/kitchen area; can sleep up to four.

Full hot breakfast buffet is included.

Any reservation not canceled within **72 hours** of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: All rooms are oceanfront two-room suites with private balconies. All have a refrigerator, microwave, wet-bar, iron/ironing board, hair dryer, guest laundry and market.

Bus Parking: Bus parking will be provided based on availability. **Advanced notice** is required. Please indicate here the number of **buses** required for your group: _____

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGE 1 & 2 of this form directly to the hotel by the postmark deadline. Keep a copy for your records.

**2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14
HOUSING FORM – page 1**

Off-Site Oceanfront Hotel - (can sleep up to six in room)

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

Country Inn & Suites
1801 Atlantic Ave.
Virginia Beach, VA 23451

Telephone: (757) 437-9100 ext. 7101 or email form to: t.sierra@landmarkhg.com

HOUSING FORM MUST BE FAXED OR MAILED BY **FEBRUARY 15**
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

3. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. The first night's room and tax (per room) is required to confirm reservations.

<input type="checkbox"/> Check enclosed	Check amount:	\$		or credit card information:	
Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

Rooms are available at the following rate:

\$152 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$176.80** per room.

Note: Rooms have two queen beds plus a sleeper sofa; **can sleep up to six.**

Free hot breakfast is included.

Any reservation not canceled within **72 hours** of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: All rooms are oceanfront - equipped with free wi-fi, refrigerator, coffee maker, microwave iron/ironing board, and hairdryer.

Bus Parking: **Free bus parking is available 2 blocks away** with permission from the hotel. Indicate here if you will need parking for a bus: _____

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGES 1 & 2 of this form directly to the hotel by Feb. 15. Keep a copy for your records.

**2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14**

HOUSING FORM – page 1

Off-Site Oceanfront Hotel (This is the oceanfront hotel closest to the convention center.)

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

Fairfield Inn & Suites by Marriott

1901 Atlantic Avenue
Virginia Beach, VA 23451

Telephone: (757) 383-6065 FAX: (757) 383-6064 Email: gbrown@coastalha.com

HOUSING FORM MUST BE FAXED OR MAILED BY **MARCH 7**
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

4. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. The first night's room and tax (per room) is required to confirm reservations. (Payment by credit card is strongly preferred. To pay by school check, please contact Gioia Brown for instructions at: 757.383.6070; gbrown@coastalha.com)

Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

All room types are available at the following rate: \$149 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$173.35 per room.**

Free full hot breakfast buffet and internet is included.

Any reservation not canceled within 72 hours of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: Rate includes a full hot breakfast buffet. All rooms are oceanfront with balcony and are newly renovated! All rooms equipped with hair dryers, iron/ironing boards, hi-speed wireless Internet. **All rooms are non-smoking.**

Parking: Bus parking is NOT available at the Fairfield Inn & Suites. **Parking is available at the Virginia Beach Visitor Center, free of charge.**

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGES 1 & 2 of this form directly to the hotel by Feb. 15. Keep a copy for your records.

**2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14**

**HOUSING FORM – page 1
Off-Site Oceanfront Hotel**

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

Holiday Inn Express
2607 Atlantic Ave.
Virginia Beach, VA 23451

Telephone: (757) 491-6900 FAX: (757) 491-2125 Email: mbarnes@hiexpressvb.com

HOUSING FORM MUST BE FAXED OR MAILED BY **FEBRUARY 15**
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

5. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. The first night's room and tax (per room) is required to confirm reservations.

<input type="checkbox"/> Check enclosed	Check amount:	\$ _____	or credit card information:		
Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

Rooms are available at the following rate:

\$159 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$184.85** per room.
Note: Rooms have two queen beds. A two-night stay is required if checking in on Friday or Saturday nights. *Free hot breakfast is included.*

Any reservation not canceled within **72 hours** of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: All rooms are oceanfront - equipped with free wi-fi, refrigerator, coffee maker, microwave iron/ironing board, and hairdryer.
Bus Parking: Bus parking is available at the Holiday Inn Express. **Please let the hotel if you need bus parking. Indicate the number of buses: _____**

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGE 1 & 2 of this form directly to the hotel by Feb. 15. Keep a copy for your records.

2024 VIRGINIA FCCLA

STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14

HOUSING FORM – page 1

Off-Site Oceanfront Hotel – Best rate for 2024

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

Sandcastle Resort

1307 Atlantic Ave

Virginia Beach, VA 23451 Telephone: (757) 428-2828 FAX: (757)422-3184 Email: sales@pashmglobal.com

HOUSING FORM MUST BE EMAILED BY **FEBRUARY 20**
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

6. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. **Deposit due at least three days prior to arrival.** Please complete the information below in order to receive guest room confirmation numbers. **Two night** (Friday & Saturday) minimum stay required.

<input type="checkbox"/> Check enclosed	Check amount:	\$		or credit card information:	
Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

Rooms with two queen beds are available at the following rate:

\$131 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$152.65** per room.
Complimentary continental breakfast is included.

Any reservation not canceled within **72 hours** of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: All rooms are oceanfront with two queen beds and with private balconies. All have a refrigerator, microwave, coffee makers, iron/ironing board, safe, and hair dryer. Sandcastle has guest laundry, fitness center, vending machines, coffee and juice 24/7 in the lobby and indoor pool. There are two restaurants, a gift shop and a convenience store on site (seasonal).

Bus Parking: Bus parking will be provided based on availability. **Advanced notice** is required. Please indicate here the number of **buses** required for your group: _____

PLEASE USE "**PAGE 2**" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGE 1 & 2 of this form directly to the hotel by the postmark deadline. Keep a copy for your records.

**2024 VIRGINIA FCCLA
STATE LEADERSHIP AND RECOGNITION CONFERENCE – April 11-14
HOUSING FORM – page 1**

**Off-Site Oceanfront Studio Suites Hotel
(can sleep up to six in some rooms – **NEWLY RENOVATED**)**

SEND THIS FORM (with page 2 list of names) DIRECTLY TO THE HOTEL:

SpringHill Suites

901 Atlantic Ave.
Virginia Beach, VA 23451

Telephone: (757) 383-6065 FAX: (757) 383-6064 Email: gbrown@coastalha.com

HOUSING FORM MUST BE FAXED OR MAILED BY **MARCH 7**
TO RECEIVE GROUP RATE BASED ON ROOM BLOCK AVAILABILITY

7. Person responsible for group:

Name:		School:	
School Address:			
City, State, Zip:			
Adviser's Email:			
Adviser's Cell #:			
School Phone:		School Fax:	

2. Dates:

Check in date:		Check out date:		Estimated arrival time:	
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3. The first night's room and tax (per room) is required to confirm reservations. (Payment by credit card is strongly preferred. To pay by school check, please contact Gioia Brown for instructions at: 757.383.6070; gbrown@coastalha.com)

Credit Card #:		Card type:		Expiration date:	
Name on card:		Signature authorizing charge:			

Queen Studio Suites (sleeps 6) are available at the following rate:

\$149 plus 15% sales tax, \$2.00 per room per night occupancy tax for inclusive rate of **\$173.35** per room.
Free hot breakfast is included.

Any reservation not canceled within **72 hours** of arrival will be charged one night's room and tax.

PLEASE INDICATE IF ANY OF THE ROOMS MUST BE HANDICAP ACCESSIBLE.

Note: All suites are oceanfront with balcony - equipped with refrigerator, coffee maker and microwave. Sleeping area is separate from desk area with sleeper sofa. **All rooms are non-smoking**

Bus Parking: Bus parking is NOT available onsite at the SpringHill Suites. Parking is available at the 9th street Holiday Travel lot for a \$25 fee per day – walkable from the hotel.

PLEASE USE "PAGE 2" OF THE HOUSING FORM TO LIST NUMBER OF ROOMS AND PERSONS TRAVELING WITH YOUR GROUP ASSIGNED TO EACH ROOM.

Send PAGES 1 & 2 of this form directly to the hotel by Feb.15. Keep a copy for your records.

(Use this page for reserving rooms at all hotels – attach to selected hotel-specific housing form.)

FCCLA Conference Housing Reservation – Page 2

Name: <input style="width: 95%;" type="text"/>	School: <input style="width: 95%;" type="text"/>
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All hotels in the FCCLA block are non-smoking.

Circle Room Choice	Names of Participants	Arrival Date	Departure Date	Confirmation # (If booked already)
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				
King bed room (1 bed) Double/queen room (2 beds) Non-Smoking				

PLEASE INDICATE IF ANY OF THE ABOVE ROOMS MUST BE HANDICAP ACCESSIBLE.