

2008 POP WARNER LITTLE SCHOLARS NATIONAL CHAMPIONSHIP WEEK

TEAM RESERVATION FORMS

*****Note: It is important that you read the “2008 Pop Warner Little Scholars National Championship Week Package Information” packet prior to completing these forms. You must also acknowledge that you have read the packet by signing the Team Information Page, which is the next page in this packet. Any rooming lists received with a Team Information Page that has not been signed, will not be accepted.**

Top 5 Reminders and Helpful Hints!

- 1. Read the Package Information Packet First** – You must read the Package Information Packet first as it contains very important information that you need to know.
- 2. Resort Choices** – Be sure to fill in all three of the resort preferences in order on the Team Information Page. The resorts being utilized for this year are: Disney's All-Star Sports Resort, Disney's All-Star Music Resort, and Disney's Port Orleans Riverside Resort.
- 3. Sign the Team Information Page** – Don't forget to sign the Team Information Page acknowledging that you have read the Package Information Packet. Your rooming list will not be accepted if it has not been signed.
- 4. Modification Cover Page** – Utilize the included Modification Cover Page to send in requests for modifications.
- 5. Important Abbreviations** – Due to the limited space on the rooming list forms, it is necessary to abbreviate certain terms to save space. Here are explanations of the abbreviations you will see on the included forms:
 - “MYW”** – This abbreviation is found in the list of tickets. MYW stands for *Magic Your Way* Ticket.
 - “WPF&M”** – This abbreviation is also found in the list of tickets. WPF&M stands for Water Park Fun and More option. This ticket add-on option adds *Plus* visits to your ticket that allows you admission to one of the following: *Disney's Blizzard Beach* Water Park, *DisneyQuest®* Indoor Interactive Theme Park, or a round of golf at Disney's Oak Trail Golf Course. Refer to page 6 of your Package Information Packet for more details.
 - “LOE”** – This is found on the rooming list underneath the space for each person's age. LOE stands for Length of Event ticket for spectators. Refer to page 6 of your Package Information Packet for more details.

TEAM INFORMATION PAGE: Needs to be completed & faxed to 407/363-7000 with Rooming List

Please check the appropriate boxes:

Number of pages: _____

- Football
 Cheer
 Dance
 Jr. Peewee
 Peewee
 Jr. Midget
 Midget
 Challenger

ALL 3 RESORT PREFERENCES MUST BE COMPLETED

Resort Preferences are subject to availability.

Resort Preference:

*1st Choice: _____

*2nd Choice: _____

*3rd Choice: _____

Designated On Site Team Contacts and Cell Phones for Check – In and Ticket Pickup:

1. _____ Cell: _____ - _____ - _____
 2. _____ Cell: _____ - _____ - _____
 3. _____ Cell: _____ - _____ - _____

Qualifying Date: _____

Team Name: _____

Team Contact's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone #: _____ Fax #: _____

Evening Phone #: _____ IATA# (for Travel Agents only): _____

Email address: _____

Please circle one:

- Team is flying
 Team is driving individual cars
 Team is chartering a bus

Estimated time of arrival: _____

I have read and agree to the policies and procedures outlined in the 2008 Pop Warner Little Scholars National Championship Week Package Information packet:

Please sign here: _____

For Disney Sports Travel Use Only:

_____ Rooms have been booked for you at the following Resort: _____

Hotel Address: _____ Phone #: _____

Each room accommodates a party of _____ people with _____

Final payment due by: _____

TEAM TOTAL AS OF _____ IS _____

AS OF _____ IS _____

AS OF _____ IS _____

AS OF _____ IS _____

EACH ROOM BLOCK CONSISTS OF 1 ROOM, PLEASE COMPLETE EACH ROOM BLOCK WITH THE NAMES OF EACH PERSON IN THE PARTY AND AGES OF ANYONE 17 YEARS OLD OR YOUNGER. PLEASE NOTE WHETHER EACH GUEST IS A COACH, PARTICIPANT, OR SPECTATOR. PLEASE MAKE COPIES OF THE ROOMING LIST PAGE AS NEEDED FOR ADDITIONAL ROOMS.

TO BE USED FOR DISNEY'S ALL STAR RESORTS

ROOMING LIST: Needs to be completed & faxed to 407/363-7000 w/ Team Information Page

TEAM NAME: _____

(PLEASE MAKE COPIES OF THIS PAGE TO ACCOMMODATE THE NUMBER OF ROOMS YOUR ARE REQUESTING)

ROOM# _____ *4-Day MYW Ticket w/ Park Hopper* *5-Day MYW Ticket w/ Park Hopper* *6-Day MYW Ticket w/ Park Hopper*
4-Day w/ Park Hopper & WPF&M *5-Day w/ Park Hopper & WPF&M* *6-Day w/ Park Hopper & WPF&M*

NAME: _____	AGE: _____	Total Dining Card Amount	ARRIVAL DATE _____ # OF NIGHTS _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	EST. TIME OF ARRIVAL: _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	<p style="text-align: center; margin: 0;">FOR DISNEY SPORTS TRAVEL USE ONLY</p> <p>RESERVATION #: _____</p> <p>TOTAL PKG PRICE: _____</p>
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	

ROOM# _____ *4-Day MYW Ticket w/ Park Hopper* *5-Day MYW Ticket w/ Park Hopper* *6-Day MYW Ticket w/ Park Hopper*
4-Day w/ Park Hopper & WPF&M *5-Day w/ Park Hopper & WPF&M* *6-Day w/ Park Hopper & WPF&M*

NAME: _____	AGE: _____	Total Dining Card Amount	ARRIVAL DATE _____ # OF NIGHTS _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	EST. TIME OF ARRIVAL: _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	<p style="text-align: center; margin: 0;">FOR DISNEY SPORTS TRAVEL USE ONLY</p> <p>RESERVATION #: _____</p> <p>TOTAL PKG PRICE: _____</p>
_____	AGE: _____	Total Dining Card Amount	
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	

ROOM# _____ *4-Day MYW Ticket w/ Park Hopper* *5-Day MYW Ticket w/ Park Hopper* *6-Day MYW Ticket w/ Park Hopper*
4-Day w/ Park Hopper & WPF&M *5-Day w/ Park Hopper & WPF&M* *6-Day w/ Park Hopper & WPF&M*

NAME: _____	AGE: _____	Total Dining Card Amount	ARRIVAL DATE _____ # OF NIGHTS _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	EST. TIME OF ARRIVAL: _____
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	<p style="text-align: center; margin: 0;">FOR DISNEY SPORTS TRAVEL USE ONLY</p> <p>RESERVATION #: _____</p> <p>TOTAL PKG PRICE: _____</p>
_____	AGE: _____	Total Dining Card Amount	
<input type="checkbox"/> Participant <input type="checkbox"/> Coach <input type="checkbox"/> Spectator <input type="checkbox"/> LOE		\$ _____	
_____	AGE: _____	Total Dining Card Amount	

TO BE USED FOR DISNEY'S ALL STAR RESORTS

Please Note: No Trundle Beds Permitted

TO BE USED FOR DISNEY'S PORT ORLEANS RIVERSIDE RESORT ONLY

ROOMING LIST: Needs to be completed & faxed to 407/363-7000 w/ Team Information Page

TEAM NAME: _____

(PLEASE MAKE COPIES OF THIS PAGE TO ACCOMMODATE THE NUMBER OF ROOMS YOUR ARE REQUESTING)

ROOM# _____ 4-Day MYW Ticket w/ Park Hopper 5-Day MYW Ticket w/ Park Hopper 6-Day MYW Ticket w/ Park Hopper
 4-Day w/ Park Hopper & WPF&M 5-Day w/ Park Hopper & WPF&M 6-Day w/ Park Hopper & WPF&M

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

ARRIVAL DATE _____ # OF NIGHTS _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

EST. TIME OF ARRIVAL: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

FOR DISNEY SPORTS TRAVEL USE ONLY

RESERVATION #: _____

TOTAL PKG PRICE: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

* _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

**For Port Orleans Riverside Only
5th guest must be age 3-9*

ROOM# _____ 4-Day MYW Ticket w/ Park Hopper 5-Day MYW Ticket w/ Park Hopper 6-Day MYW Ticket w/ Park Hopper
 4-Day w/ Park Hopper & WPF&M 5-Day w/ Park Hopper & WPF&M 6-Day w/ Park Hopper & WPF&M

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

ARRIVAL DATE _____ # OF NIGHTS _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

EST. TIME OF ARRIVAL: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

FOR DISNEY SPORTS TRAVEL USE ONLY

RESERVATION #: _____

TOTAL PKG PRICE: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

* _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

**For Port Orleans Riverside Only
5th guest must be age 3-9*

ROOM# _____ 4-Day MYW Ticket w/ Park Hopper 5-Day MYW Ticket w/ Park Hopper 6-Day MYW Ticket w/ Park Hopper
 4-Day w/ Park Hopper & WPF&M 5-Day w/ Park Hopper & WPF&M 6-Day w/ Park Hopper & WPF&M

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

ARRIVAL DATE _____ # OF NIGHTS _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

EST. TIME OF ARRIVAL: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

FOR DISNEY SPORTS TRAVEL USE ONLY

RESERVATION #: _____

TOTAL PKG PRICE: _____

NAME: _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

* _____ AGE: _____
 Participant Coach Spectator LOE

Total Dining Card Amount
\$ _____

**For Port Orleans Riverside Only
5th guest must be age 3-9*

TO BE USED FOR DISNEY'S PORT ORLEANS RIVERSIDE RESORT ONLY

Please Note: Trundle Beds Are Permitted, but limited.

POP WARNER MODIFICATION COVER PAGE

Must be used for modifications only

Team Name: _____

Team Contact: _____

Phone Number: _____ Fax Number: _____

Number of pages including this cover page: _____

Summary of modifications:

<u>Room #</u>	<u>Modification</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- **Modifications made after the final rooming list due date will be assessed a \$50 per room fee.**
- **Remember to include the Team Information page and only the pages of the original rooming list that you are requesting modifications. Clearly indicate your changes on the original rooming list as well.**
- **Modifications to dates or the request for additional rooms is subject to availability.**
- **Any modifications made within 5 days of arrival must be brought directly to the Check-in area at Celebrity Hall or the Pop Warner Check-in area at Disney's Port Orleans Riverside. These changes will not be accepted in our office.**
- **Rooms that are modified within 5 days of arrival will not be located with the rest of the team.**
- **A change fee of \$100.00 per change will be applied accordingly for all changes made upon arrival.**

CREDIT CARD PAYMENT FORM: Needs to be completed & faxed to 407/363-7000 w/ Corresponding Reservation Numbers and Amounts. Incomplete documents will not be processed.

**DISNEY SPORTS TRAVEL
WALT DISNEY TRAVEL COMPANY
Phone: (407) 939-7810 / Fax: (407) 363-7000**

Please complete the following information in order to have your credit card charged for payment. Credit Cards will be charged at the time that the document is received.

The credit cards accepted by The Walt Disney Travel Co. Sports Travel are American Express, Master Card, Visa, Discover, and Diners Club.

IMPORTANT: Most debit cards/credit cards have a pre-determined daily spending limit. If using a debit card; please call your bank to verify and increase this limit if necessary prior to faxing in payment.

Team Name: _____ Event: POP WARNER SUPERBOWL

Reservation #: _____ Name on reservation: _____ Amount to be charged: _____

Type of credit card: _____ Credit card #: _____ Expiration Date: _____

Cardholder's Name: _____ Cardholder's Address: _____

Cardholder's Signature: _____ Cardholder's Phone #: _____

Reservation #: _____ Name on reservation: _____ Amount to be charged: _____

Type of credit card: _____ Credit card #: _____ Expiration Date: _____

Cardholder's Name: _____ Cardholder's Address: _____

Cardholder's Signature: _____ Cardholder's Phone #: _____

Reservation #: _____ Name on reservation: _____ Amount to be charged: _____

Type of credit card: _____ Credit card #: _____ Expiration Date: _____

Cardholder's Name: _____ Cardholder's Address: _____

Cardholder's Signature: _____ Cardholder's Phone #: _____

CHECK PAYMENT DISTRIBUTION FORM: Needs to be completed, attached to Certified/Cashiers Check/Money Order & mailed (overnight) with corresponding Reservation Numbers and Amounts. Incomplete documents will not be processed.

This form should be sent along with a check to advise the payment department which reservations to apply the check/checks to. Check must be a cashiers check or money order payable to Walt Disney World.

Check #: _____ Amount of Check: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Reservation #: _____ Name on reservation: _____

Amount to be applied: _____

Total amount to be applied: _____