



NORTHWESTERN  
UNIVERSITY

## Hotel Reservation Agreement Form

The purpose of this form is to help Northwestern University's departments assure timely and authorized direct billing. Direct billing of hotel charges is an exception to the University's travel policy.

This form authorizes the hotel to invoice the University Authorized Department for specified charges for accommodations. Charges not approved by the Department Head or Authorized Person shall be paid by the guest. It will be the responsibility of the hotel to collect from the guest all charges not approved.

### Direct Billing Information for Hotel Invoice

Authorized Dept.: \_\_\_\_\_  
Dept. Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
NU Dept. CUFS or PD #: \_\_\_\_\_  
Guest Name: \_\_\_\_\_  
Date of Arrival: \_\_\_\_\_  
Date of Departure: \_\_\_\_\_  
Confirmation #: \_\_\_\_\_

Date: \_\_\_\_\_  
Hotel Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Room Type: \_\_\_\_\_ Room Rate: \_\_\_\_\_

### Department Head or Authorized Person Signature

\_\_\_\_\_

### Authorized Charges \*\*

Room w/ Tax:  Local Calls:  Long Distance Calls:   
Breakfast:  Lunch:  Dinner:  Parking:   
Other:  \_\_\_\_\_  
Comments: \_\_\_\_\_

\*\* All items checked are to be charged to the Authorized Department. Items not checked are to be charged to the NU guest. The original form should be kept by the Authorized Department. Completed copies of this form should be send to (1) the hotel and (2) the NU guest.