CAMP BEAUREGARD LODGING RESERVATION FORM

Rank

First Name

Last Name

Address:

Gender:

City:

State:

Zip Code:

Phone Number:

Email:

Organization:

CSM Name

Arrival Date:

Departure Date:

Duty Status:

CREDIT CARD INFORMATION

**CREDIT CARD REQUIRED FOR RESERVATION*

Credit Card #

Expiration Date:

LODGING RATES

**GSA, Non Official, Official, IDT/AT Rates Will Apply*

LOUISIANA NATIONAL GUARD

PROTECT WHAT MATTERS℠