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EVENT PROMOTIONAL MATERIAL REQUEST

EVENT/GROUP NAME: _____ REFERRED BY: _____

CONTACT: _____ NUMBER/EMAIL: _____

EVENT DATE: _____ LOCATION: _____

TOTAL ATTENDANCE: _____ # OF FAMILIES: _____

TELL US ABOUT YOUR ATTENDEES: (OUT OF STATE, LOCAL, M/F, AGE GROUP, INTEREST, ETC) _____

DO YOU HAVE ANY HOTEL/MOTEL ROOM BLOCKS? YES NO

IF YES, HOW MANY AT EACH PROPERTY? (Include list of properties) _____

MATERIALS REQUESTED: _____

HOW WILL INFO BE DISTRIBUTED? _____

IS ADDITIONAL ASSISTANCE NEEDED FOR PLANNING YOUR EVENT?: YES NO

DETAILS _____

-----OFFICE USE ONLY-----

MATERIALS PROVIDED & QUANTITY: _____

*REQUEST TAKEN: _____ *REQUEST FILLED: _____ *DATE PICKED UP: _____

**Provide date and initial (ie. 7/31/14 AG)*

Revised 6/28/16