



Maryland Aviation Administration

BWI CONFERENCE ROOM RESERVATION REQUEST FORM

Name of Lessee & Contact Person: _____

Telephone: _____ Fax: _____

Mailing Address: _____

Email Address: _____

Purpose: (Check One) Banquet Meeting Classroom Other (Please Specify)
May not exceed 33 for banquets, 72 for meetings and 25 for classrooms.

Date: _____ Times: _____ Number of Attendees: _____

Special Arrangements: _____ Catering*, Signs*, Etc.

The charge for the conference room is \$ _____ per hour.

Payment in full is due on the day of the event, or in advance.

Parking fees for those using the BWI conference room are not included.

Method of payment: (Check One) Master Card Visa

Card Number: _____ Expiration Date: _____

Corporate or Individual Name on Card: _____

Check (Made payable to the MAA) Check Number: _____

Airport tenants may elect to have the room charges billed by the MAA.

Mail Request to: Maryland Aviation Administration
Division of Customer Service
P.O. Box 8766
BWI Airport, Maryland 21240-0766

For further information contact: *Wayne B. Vance* – wvance@bwiairport.com
(410) 859-7661 FAX (410) 859-7920
Customer Service Coordinator