



**RESERVATIONS MUST BE A MINIMUM
OF 3 NIGHTS**

*Sheraton Arlington Hotel
1500 Convention Center Dr.*

Arlington, TX 76011

Phone: (817) 261-8200

Fax: (817) 548-2873

Enjoy a Dive-In movie by the pool a summer night or the complimentary fitness center. Other amenities in each room includes an iron, ironing board, coffee maker and hair dryer.

ROOM TYPES & RATES

Single & Double \$ 125.00 + tax

Arrival Date _____ Arrival Time _____ Departure Date _____

Guaranteed by Credit Card No. _____

VISA Master Card American Express Other _____

Check-In time is 3:00 p.m. and Check-Out time is 12:00 pm. Should any room become available prior to 3:00 p.m., early arrivals will be accommodated on a space available basis. All room rates

are subject to applicable taxes and you will need to provide your district exemption certificate. When making your reservation , **ask for TAPT Group Rate**. Room block is not guaranteed after **Tuesday, May 25, 2010**.

Name (Print or Type) _____

School District/Organization _____

Address _____ City _____ State ____ Zip _____

Office Phone _____ Fax _____

E-mail address _____

Sharing a Room With _____



Arlington Hilton Hotel

2401 E. Lamar Blvd.

Arlington, TX 76011

Phone: (817) 640-3322

Fax: (817) 633-1430

Park your car and get on board the Arlington Trolley. Trolley Service is available from the hotel to all Arlington nearby Arlington attractions, including the Convention Center, Six Flags and other hotels.

ROOM TYPES & RATES

Single & Double \$ 125.00 + tax

Arrival Date _____ Arrival Time _____ Departure Date _____

Guaranteed by Credit Card No. _____

VISA Master Card American Express Other _____

Check-In time is 3:00 p.m. and Check-Out time is 12:00 pm. Should any room become available prior to 3:00 p.m., early arrivals will be accommodated on a space available basis. All room rates

are subject to applicable taxes and you will need to provide your district exemption certificate.

When making your reservation, **ask for TAPT Group Rate**. Room block is not guaranteed after **Tuesday, May 27, 2010**.

Name (Print or Type) _____

School District/Organization _____

Address _____ City _____ State ____ Zip _____

Office Phone _____ Fax _____

E-mail address _____

Sharing a Room With _____



Crown Plaza Suites Arlington

700 Ave H East

Arlington, TX 76011

Phone: (817) 394-5000

Fax: (817) 394-5100

Amenities: In-door pool, fitness center, coffee maker, mini refrigerator, free newspaper delivered to room.

ROOM TYPES & RATES

Single & Double \$ 119.00 + tax

Arrival Date _____ Arrival Time _____ Departure Date _____

Guaranteed by Credit Card No. _____

VISA Master Card American Express Other _____

Check-In time is 3:00 p.m. and Check-Out time is 12:00 pm. Should any room become available prior to 3:00 p.m., early arrivals will be accommodated on a space available basis. All room rates

are subject to applicable taxes and you will need to provide your district exemption certificate.

When making your reservation , **ask for TAPT Group Rate**. Room block is not guaranteed after **Tuesday, May 27, 2010**.

Name (Print or Type) _____

School District/Organization _____

Address _____ City _____ State ____ Zip _____

Office Phone _____ Fax _____

E-mail address _____

Sharing a Room With _____



Holiday Inn Arlington

1311 Wet & Wild Way

Arlington, TX 76011

Phone: (817) 460-2500

Fax: (817) 460-2510

*Amenities: coffee maker, iron, ironing board, hair dryer in all rooms
Located on the Trolley Route and Kids eat free.*

ROOM TYPES & RATES

King w/sofa bed	\$79.00 + tax
Double	\$79.00 + tax

Arrival Date _____ Arrival Time _____ Departure Date _____

Guaranteed by Credit Card No. _____

VISA Master Card American Express Other _____

Check-In time is 3:00 p.m. and Check-Out time is 12:00 pm. Should any room become available prior to 3:00 p.m., early arrivals will be accommodated on a space available basis. All room rates

are subject to applicable taxes and you will need to provide your district exemption certificate.

When making your reservation , **ask for TAPT Group Rate**. Room block is not guaranteed after **Tuesday, June 1, 2010**.

Name (Print or Type) _____

School District/Organization _____

Address _____ City _____ State ____ Zip _____

Office Phone _____ Fax _____

E-mail address _____

Sharing a Room With _____