

# MATC 2024 GRAD STUDENT ROOM BLOCK

**General Information:** This year for the 2024 MATC Conference, we are excited to announce that there have been a limited number of additionally discounted rooms set aside at for specifically graduate students! These location of these rooms and rates are listed below:

**Hotel:** Hilton Garden Inn Madison Downtown

**Additionally Discounted Rate:** \$119/per night

We want to use this opportunity to make the conference as accessible for grad students as possible. Thus, to ensure maximum use we will prioritize stays within the range of Thursday-Saturday, and we will not be extending this discount to single occupant rooms. Should rooms remain by the end of the application process, these rates might be extended to independent scholars and undergraduate students in multi-occupant rooms.

To apply for the Grad Student Room Block:

**Step One:** Find a roommate or roommates from your home institution or colleagues you know that are attending. If you do not have a roommate yet, [you can fill out the MATC 2024 Graduate Roommate Form](#). The form includes specific steps and access information for the spreadsheet of roommate contact information.

**Step Two:** Book accommodations at the Hilton Garden Inn Madison Downtown at the MATC discounted rate of \$139/night.

**Step Three:** You will fill out the form below with all relevant information and signatures, and then submit the form VIA email to [grad\\_rep@matc.us](mailto:grad_rep@matc.us). For fastest processing, please use the subject line **MATC Grad Room Block Application: Last Names** and with the Roommate Agreement Form attached as a PDF document. Application forms will be processed in the order in which they are received.

**Step Four:** Once processed, a grad rep will reach out and confirm if you are a part of the room block or if all slots were filled prior to submission. Once you are confirmed to be part of the room block, you are all set!

**Important note/FYI:** the room booking will remain registered at the \$139/night at check-in, and the additional discount will be processed at check-out.

We must have the final list for the room block to the Associate Conference Planner by mid-February, so you are encouraged to get all materials to us ASAP.

If you have any further questions, please reach out to [grad\\_rep@matc.edu](mailto:grad_rep@matc.edu)

See you in Madison!

Tyler and Alivia, MATC Graduate Student Representatives

**MATC ROOMMATE AGREEMENT FORM FOR GRAD STUDENT ROOM  
BLOCK**

The following people plan to attend the 2024 Mid-America Theatre Conference and agree to be roommates:

**Roommate #1:**

Name: \_\_\_\_\_  
School/Program: \_\_\_\_\_  
Institutional Email: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_.

**Roommate #2:**

Name: \_\_\_\_\_  
School/Program: \_\_\_\_\_  
Institutional Email: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_.

**\*\*\*Roommate #3:**

Name: \_\_\_\_\_  
School/Program: \_\_\_\_\_  
Institutional Email: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_.

**\*\*\*Roommate #4**

Name: \_\_\_\_\_  
School/Program: \_\_\_\_\_  
Institutional Email: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_.

\*\*\* if applicable

**BOOKING AGREEMENT:**

We confirm we have booked a room at the Hilton Garden Inn Madison Downtown at the MATC Discounted Rate:

Date of check-in: \_\_\_\_\_  
Date of check-out: \_\_\_\_\_  
Last Name on Booking: \_\_\_\_\_

**Optional:** to ensure smoothest fee adjustment, the booking confirmation number we were provided through Hilton is \_\_\_\_\_

**TOTAL COST OF AGREEMENT:**

The total cost for the stay listed above is priced at \$ \_\_\_\_\_.

**If any additional fees** such as damage fines or à la carte charges are added to the total cost at the end of our stay, they will be paid according to the agreement stated on the following lines:

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**PRIMARY CORRESPONDENT / WHO'S FRONTING THE BILL:**

In the event that the hotel does not allow the party to split payments, Roommate # \_\_\_\_\_, (name) \_\_\_\_\_ **agrees to be the primary correspondent** between the location's administrator (i.e. the hotel) and the roommate party. They agree to check-in and check-out on time to ensure that the cost of the stay is consistent with the roommate agreement. If the lodging does not allow split payments, the primary correspondent agrees to front the bill under their name/account, after which they will be reimbursed by the rest of the roommate party.

**SPLITTING THE BILL & REIMBURSEMENT PLAN:**

We agree to split the bill as follows:

Roommate # \_\_\_\_\_, \_\_\_\_\_, the primary correspondent, will pay: \$ \_\_\_\_\_ AND/OR cover upfront 100% of the final bill (room rates, additional taxes/fees, etc.) to Hilton Garden Inn Madison Downtown on \_\_\_\_\_ (check-out date).

Roommate # \_\_\_\_\_, \_\_\_\_\_ will pay their share of \$ \_\_\_\_\_ AND/OR reimburse the primary correspondent \_\_\_\_\_ % of the total bill by the following date: \_\_\_\_\_.

\*Roommate # \_\_\_\_\_, \_\_\_\_\_ will pay their share of \$ \_\_\_\_\_ AND/OR reimburse the primary correspondent \_\_\_\_\_ % of the total bill by the following date: \_\_\_\_\_.

\*Roommate # \_\_\_\_\_, \_\_\_\_\_ will pay their share of \$ \_\_\_\_\_ AND/OR reimburse the primary correspondent \_\_\_\_\_ % of the total bill by the following date: \_\_\_\_\_.

\*if applicable

**AGREEMENT OF PERSONAL AND FINANCIAL LIABILITY:**

We agree to accommodate the personal, religious, and accessibility needs of everyone in the roommate party. **We understand that the MATC Conference and its larger organization is not in any way legally, financially, or otherwise**

**responsible for this roommate pairing.** The MATC organization and its executive committee members will neither participate in facilitating nor are responsible for inner-roommate reimbursement or resolving financial discrepancies. MATC is in no way responsible for any possible additional fees or damages incurred to the hotel room or any occupant's private personal property. We understand that all personal and financial liability is solely upon the renters/conference attendees listed in this document.

**SIGNATURES:**

By printing our names and signing below, we acknowledge that we have read and agree to the entirety of this document and agree to all statements of personal liability and financial responsibility.

Date: \_\_\_\_\_.

Signed

_____	_____
_____	_____
_____	_____
_____	_____