



**CALIFORNIA**  
STATE ASSOCIATION

**2025 CA FCCLA State  
Leadership Conference: Dare to Dream  
Hotel Reservation Form**

Complete this form for each room request. The first night's room cost or a credit card guarantee will be required as a deposit for each room. Please email or fax your requests as indicated below. *Do not email your credit card, this delivery method is not secure.*

**Please complete this form and email or fax it to the contact of each hotel as indicated below. To confirm room with payment, please call number associated with that hotel.**

Please note, hotel selections are subject to availability and are not guaranteed. All reservations are made on a first-come, first-serve basis, and these rates are available only through form completion. All room rates are subject to a 13.25% occupancy tax, per night, and the CA Tourism Assessment fee of 0.3%.

Advisor Responsible for Group's Billing \_\_\_\_\_

First Night's Deposit by:  Check  Credit Card Check-in Date \_\_\_\_\_ Check-out Date \_\_\_\_\_

*Checks must arrive 4 weeks before arrival.*

School \_\_\_\_\_

School Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

School Phone ( ) \_\_\_\_\_ School Fax ( ) \_\_\_\_\_ Advisor Cell Phone ( ) \_\_\_\_\_

Advisor Email Address \_\_\_\_\_

Credit Card Type \_\_\_\_\_ Number \_\_\_\_\_ Exp. \_\_\_ / \_\_\_ CID \_\_\_\_\_

Name on Card \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Authorized Signature for Credit Card \_\_\_\_\_

**Please see page 3 for Room Occupant Information**

**DEADLINE TO FAX OR MAIL RESERVATIONS is Friday, April 4, 2025. CONFIRMATION**  
will be sent directly from hotel via email.

*PLEASE NOTE: After the reservation deadline date has passed, send all changes & cancellations to the hotels. Please refer to your confirmation letter for hotel policies regarding changes, cancellation, and/or early departure penalties.*



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## Hotels

### **Riverside Marriott at the Convention Center**

*(Adjacent to the Convention Center)*

Single (King bed) or Double (two Queen beds or King with a Double sofa bed)

Hotel check-in: 3:00 p.m. and  
check-out: 12:00 p.m.

\$169 per night

Marriott Riverside at the Convention Center (All Checks must be received no later than 4 weeks prior to arrival, anything past that will not be accepted)

Denise Basore – Reservation Coordinator

denisebasore@remingtonhotels.com

Phone: 951-786-7189

Fax: 951-369-7127

### **Hyatt Place Riverside/ Downtown Center**

*(Adjacent to the Convention Center)*

Single (King bed w/sofa pull out) and double (two Queen beds)

Hotel check-in: 3:00 p.m. and  
check-out: 12:00 p.m.

\$195 (King) per night

\$205 (Double) per night

Includes hot breakfast buffet

Hyatt Place (All Checks must be received no later than 4 weeks prior to arrival, anything past that will not be accepted)

Abigail Hernandez – Sales Coordinator

Abigail.hernandez1@hyatt.com

Phone: 951-321-3505

Fax: 951-248-0727

### **The Mission Inn Hotel & Spa**

*(One block from the Convention Center)*

Single (1 King bed) or Double (two Queen beds)

Hotel check-in: 4:00 p.m. and  
check-out: 12:00 p.m.

\$149 per night

Mission Inn Hotel & Spa (All Checks must be received no later than 4 weeks prior to arrival, anything past that will not be accepted)

Raylene Lopez

rlopez@riversidecvb.com

Phone: 951-335-7040

Fax: 951-222-4712

### **Hampton Inn**

*(Adjacent to the Convention Center)*

Run of House  
(Single or Double)

Hotel check-in: 3:00 p.m. and  
check-out: 12:00 p.m.

\$199 (King) per night

\$209 (Double) per night

Includes hot breakfast

Jennifer Ortega

jennifer.anter@hilton.com

Phone: 951-788-5000



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For each room reserved, fill-in the room type, the name of each occupant in the room indicating gender and adult or student for each. (Room type: Single is one bed for 1-2 people/Double is 2 double beds for 2-4 people)

#	NAME	GEN- DER	ADULT OR STUDENT
<b>ROOM 1 Type</b>			
1			
2			
3			
4			
<b>ROOM 2 Type</b>			
1			
2			
3			
4			
<b>ROOM 3 Type</b>			
1			
2			
3			
4			
<b>ROOM 4 Type</b>			
1			
2			
3			
4			
<b>ROOM 5 Type</b>			
1			
2			
3			
4			

#	NAME	GEN- DER	ADULT OR STUDENT
<b>ROOM 6 Type</b>			
1			
2			
3			
4			
<b>ROOM 7 Type</b>			
1			
2			
3			
4			
<b>ROOM 8 Type</b>			
1			
2			
3			
4			
<b>ROOM 9 Type</b>			
1			
2			
3			
4			
<b>ROOM 10 Type</b>			
1			
2			
3			
4			