

Packages: \_\_\_\_\_ of \_\_\_\_\_

**PACKAGE LABEL**

**RECIPIENT (Last Name, First Name):** \_\_\_\_\_

Organization/Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

**The Westin Ottawa  
c/o Alana Hendry  
Meeting & Event Management  
11 Colonel By Drive  
Ottawa, On K1N 9H4**

Recipient's contact number: \_\_\_\_\_

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**DELIVERY DETAILS:**

**Name of Event:** \_\_\_\_\_

**Date of Event:** \_\_\_\_\_

**Where is the delivery required?**

☐ Booth

☐ Function Room

☐ Guest Room

\_\_\_\_\_  
Please specify the name of the function  
room or booth number if known.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date Required:** \_\_\_\_\_

**Time Required:** \_\_\_\_\_

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**SENDER (Last Name, First Name):** \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Please complete the necessary information legibly and attach onto each one of your packages. (This form can be sent by e-mail.)**

A charge for receiving, processing, storing, coordinating with your event and delivering your package/s will be added to your guestroom account or a master account. A signature is required for packages delivered to Function Rooms, Guestrooms or Exhibit Booths. If the recipient is not available, please review the Signature Waiver statement below.

**Signature Waiver:** Please deliver my package/s to the location specified above, at the time specified above. In the event that there is a shortfall of any kind, I understand that The Westin Ottawa will do their best to ascertain the reasons, but agree that The Westin Ottawa will not be held responsible for such shortfall.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
NAME

\_\_\_\_\_  
DATE