

DEADLINE:
MAY 12, 2008

LODGING RESERVATION FORM
RSA/ISBRA JOINT SCIENTIFIC MEETING
Grand Hyatt Washington, June 28-July 3, 2008

DEADLINE:
MAY 12, 2008

NAME (Please print all info on form clearly): _____ M _____ F _____

INSTITUTION/BUSINESS ADDRESS: _____

CITY: _____ STATE/COUNTRY: _____ ZIP: _____

TEL: _____ FAX: _____

E-MAIL: _____

ARRIVAL DATE: _____ DEPARTURE DATE: _____ NO. NIGHTS: _____

HOTEL ROOMS (Please indicate 1st, 2nd and 3rd choices; rates are per night..)

- _____ Grand Hyatt Washington, w/1 king bed @ \$209 single/double occupancy;
 - _____ Grand Hyatt Washington, w/2 double beds @ \$209 double, \$234 triple, \$259 quad occupancy;
 - _____ Hilton Garden Inn, w/1 king bed @ \$179 single, \$189 double occupancy;
 - _____ Hilton Garden Inn, w/2 double beds @ \$189 double, \$199 triple, \$209 quad occupancy;
 - _____ 4-Points by Sheraton Washington DC Downtown, w/1 king bed @ \$175 single/double occupancy;
 - _____ 4-Points by Sheraton DC Downtown, w/2 double beds @ \$175 double, \$195 triple, \$205 quad occupancy.
- 1-Bedroom SUITE: Grand Hyatt Washington, w/fold-out couch in parlor & 1 king or 2 double beds in bedroom
 _____ @ \$575 single/double, \$600 triple, \$625 quad occupancy.

FOR _____ (number) adults and _____ (number) children in a maximum of 2 beds per room.

SPECIAL REQUIREMENTS: ___ SMOKING; ___ NON-SMOKING; OTHER _____

___ I PLAN TO SHARE ACCOMMODATION WITH:

SOCIAL GUEST (NAME): _____ CHILDREN (NUMBER): _____ AGES: _____

OTHER CONFEREES: 1. _____ 2. _____

___ I REQUIRE A ROOMMATE. PLEASE SEND LIST OF OTHERS REQUESTING ROOMMATES.

A DEPOSIT sufficient to cover the first night's lodging and tax (14.5 %) will be charged to your credit card by the hotel upon your arrival. Lodging requests must be received by **MAY 12**. After May 12, requests will be honored on a space available basis only. **Checks/purchase orders cannot be accepted. Please supply your credit card information.***

Card Type _____ No. _____ Exp. Date _____

Name on Card _____ Signature _____

Card Billing Address & ZIP CODE _____

You will receive final reservation confirmation directly from the hotel.

FINAL PAYMENT for lodging is due upon arrival. Early departures and late arrivals will not be refunded. **CANCELLATIONS** or changes must be made in writing to both Scientific Conference Planners (SCP) AND your HOTEL (contact numbers on General Information page). Cancellations made less than 72 hours prior to arrival will result in a forfeiture of one night's room rate and tax.

***On-line credit card payments will be processed by a secure server.** Otherwise return the Printable (PDF) version of the form by post or fax directly to SCP, and supply all credit card information.

SCIENTIFIC CONFERENCE PLANNERS

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