



# HOTEL RESERVATION FORM

Pediatric Academic Societies' Annual Meeting May 1-4, 2004 San Francisco, CA

### Instructions

Reservations can be made from December 10, 2003 through April 1, 2004 by choosing one of the following methods.

**INTERNET:**

*Preferred Method*

Book your reservation on-line, 24 hours a day, 7 days a week, using the interactive site at [www.pas-meeting.org](http://www.pas-meeting.org) and receive immediate confirmation.

**TELEPHONE:** Call the San Francisco Housing Bureau, 8:00am-5:00pm CST, Monday-Friday, at: 800.424.5256 (toll free) or 847.940.2154 (International)

**FAX:** Send a completed form, one copy per room, to 800.521.6017 (Domestic) or 847.940.2386 (International).

**MAIL:** Send a completed form, one copy per room, to PAS/San Francisco Housing Bureau, 108 Wilmot Road, Suite 400, Deerfield, IL 60015.

**CONFIRMATIONS:** Confirmations are provided by the housing bureau and are available via email, fax or mail. Confirmations will be e-mailed when e-mail addresses are provided unless otherwise indicated. All processing deadlines and cancellation policies are noted on confirmations. Hotels do not send out confirmations.

**ROOM RATES/TAXES:** To take advantage of the special PAS convention rates, be sure to book your reservation by Thursday, April 1, 2004. After this date, the official PAS blocks will be released, and the hotels may charge significantly higher rates.

All rates are per room per night and are subject to a 14.05% tax (subject to change). Please provide room, bedding and special needs preferences. The hotels will assign specific room types upon check-in, based upon availability. Requests for five or more rooms must be in writing. Special requests cannot be guaranteed, however hotels will do their best to honor all requests.

**DEPOSITS:** A \$150.00 per standard room deposit is required for all reservations (\$300 1br suite/\$450 2br suite). Deposits are required for all reservations at the time of booking. Major credit cards (MasterCard, Visa, American Express, and Discover) are accepted as well as checks (in U.S. Dollars and drawn on a U.S. Bank) made payable to: PAS/San Francisco Housing Bureau. Housing deposits made by check must accompany a housing form. *We are not able to accept wire transfers, money orders or supply invoices for hotel deposits.*

**CHANGES:** Changes may be made via telephone, fax, mail or email up until April 7, 2004. Changes made after cut-off date must be made with hotels directly.

**CANCELLATIONS/REFUND PROCEDURE:** Room reservations may be cancelled by telephone, fax or email. For a full refund, cancellations must be received by 5:00p CST on or before April 7, 2004. Cancellations will be refunded in the same form of payment as originally made.

Cancellations made after April 7, 2004 and PRIOR to 72 hours of arrival should be made with the hotel. After April 7, a \$16.00 processing fee will be deducted from your deposit, and the hotel will issue a refund minus the processing fee within 60-90 days after the convention. **Cancellations within 72 hours of the attendee's arrival will result in forfeiture of the entire deposit.**

### Hotel Information

**ARRIVAL DATE:** \_\_\_\_\_

**DEPARTURE DATE:** \_\_\_\_\_

**HOUSING BLOCKS:**

- PAS, LWPES or APPD Attendee
- ASPN Attendee
- Reach Out and Read Attendee

**HOTEL SELECTION:**

*(List three choices in order of preference).*

First: \_\_\_\_\_

Second: \_\_\_\_\_

Third: \_\_\_\_\_

Reservations will be processed on a first come, first served basis. If all three requested hotels are unavailable, please process this reservation according to:

- Comparable room rate
- Proximity to conference site

**ROOM TYPE REQUESTED:**

*(must fill out both)*

Number of people in room: \_\_\_\_\_

Number of beds in room:  1 Bed  2 Beds

**List All Occupants in Room** *(Include yourself)*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Special Needs:** \_\_\_\_\_

- Smoking  Non-Smoking

### SEND CONFIRMATION TO: *(Fill this portion completely)*

**NAME:**

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_  
*If outside the USA, provide country & city codes along with the telephone numbers.*

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Do not send this form to PAS. Send it to the [PAS / San Francisco Housing Bureau](http://www.pas-meeting.org) via Fax or Mail. Please use one form per room. Make copies as needed.

### Exhibitor Housing Statement

**Exhibitors must secure housing using the PAS Exhibitor Housing Form on the PAS website.**

**Exhibitors should not use this form.**

### Deposit Information

**All hotels require a credit card or check deposit of \$150 U.S. with each reservation request. *(See cancellation policy)***

Housing forms received without a valid credit card or check deposit will be returned and will not be processed. *(No cash deposits accepted)*

**CREDIT CARD**

- AMERICAN EXPRESS
- MASTERCARD
- VISA
- DISCOVER \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name of Cardholder \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_

**CHECK**

*(Applicable for Mail in reservations only)*

Mail your check made payable to:  
**PAS / San Francisco Housing Bureau**  
 108 Wilmot Road, Suite 400  
 Deerfield, IL 60015