

# 1999 ASIC/SOC CONFERENCE

# HOTEL RESERVATION FORM

Please type or print clearly. Use one form for each room request. Photocopy additional forms if necessary.

Name	RATES	
Organization	Single/Double	\$123
Address		
Address		
City/State/Zip/Country		
Telephone	Fax	Arrival Date: _____
Special Requests	Departure Date: _____	

Hotel Reservations must be received by Tuesday, August 31. After August 31, conference rate and room are subject to availability. A first night's credit card deposit must accompany this Hotel Reservation Form. The hotel will send a confirmation to you. It is the responsibility of each participant to make changes or cancellations 48 hours prior to arrival. No refunds will be given by the hotel for cancellations with less than 48 hours notification.

Reservations must be guaranteed by a credit card. Please complete the following: Credit card type: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**DEADLINE FOR RESERVATIONS: AUGUST 31, 1999**

RETURN TO:

DoubleTree Hotel Pentagon City at National Airport  
300 Army Navy Drive  
Arlington, VA 22202

Reservations: 1-703-416-4100

Fax: 1-703-416-4147