

HOTEL RESERVATION FORM FOR STANDARD ROOMS

Read the housing instructions first. If you require a suite you must fill out a suite form.

ALLIED SOCIAL SCIENCE ASSOCIATIONS
2010 ANNUAL MEETINGS
JANUARY 3-5 (Sunday, Monday & Tuesday)
ATLANTA, GA

DEADLINE TO MAKE RESERVATIONS
AND TO BE LISTED IN THE HOTEL
DIRECTORY IS **DECEMBER 1ST**
(See the housing instructions before booking)

ENTER YOUR REQUIRED ASSA REGISTRATION ID # _____ Each room request requires a different number.

Once you register you will receive an email confirmation with your five digit registration ID number.
This number is required to book a hotel room or suite. Read the housing instructions before trying to book a room.

INTERNET Submit it directly using the interactive site http://www.vanderbilt.edu/AEA	FAX 24 Hours 800-521-6017 International fax 847-996-5401	PHONE 8 a.m.—5.p.m. CST 800-974-9833 International phone 847-996-5875	MAIL Send completed form to: Experient Housing (ASSA) 568 Atrium Drive Vernon Hills, IL 60061-1731
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SEND CONFIRMATION TO:

LAST _____ FIRST _____ MI _____

EMAIL ADDRESS _____

FAX _____ DAYTIME PHONE _____

UNIVERSITY/AFFILIATION (if applicable) _____

ADDRESS _____

CITY/STATE/PROVINCE _____

ZIP/POSTAL CODE, COUNTRY _____

ROOM REQUIREMENTS:

ARRIVAL DATE _____ DEPARTURE DATE _____

HOTEL PREFERENCE:

1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____

NUMBER OF PEOPLE TO OCCUPY ROOM _____ NUMBER OF BEDS REQUESTED IN ROOM _____

LIST ALL ROOM OCCUPANTS: (List ages of children)

1 _____ 2 _____ 3 _____ 4 _____

NON-SMOKING ROOM _____ SPECIAL NEEDS _____

CREDIT CARD GUARANTEE:

All hotels require a credit card to guarantee a reservation. Housing forms received without credit card information will not be processed. Fill out the credit card information entirely. Credit card must be valid through January 2010. Suite request must be faxed in on a suite form. See housing instructions regarding cancellations.

American Express Mastercard Visa Discover

ACCOUNT NUMBER _____ Expiration Date ____/____/____

NAME OF CARD
HOLDER _____

SIGNATURE _____

PLEASE USE ONE FORM PER ROOM. MAKE COPIES AS NEEDED.