Exhibitor Room Block Reservation Form

ASHP Summer Meeting & Exhibition

June 9–13, 2012 | Baltimore Convention Center | Baltimore, Maryland

A contract for exhibit space or sponsorship must be submitted to ASHP prior to requesting a guest room block. All reservations must be made through ASHP and are subject to ASHP's approval.
All personnel must be registered for the meeting in order to receive the convention rate. Exhibitors or sponsors who do not adhere to these procedures may be subject to denial of exhibit space and/or request for meeting space at future ASHP meetings.

THREE WAYS TO SUBMIT YOUR ROOM BLOCK REQUEST FORM — DO NOT MAIL TO ASHP

IMPORTANT DEADLINES

April 12, 2012 A complete rooming list with names must be submitted for all blocks held. Any rooms not reserved will be released. Requests for additional rooms will be based on availability.

May 17, 2012 Final cut-off date for reservations.

MAIL: ASHP/The Housing Connection
175 S. West Temple, Suite 140, Salt Lake City, UT 84101

EMAIL: ASHP@housingregistration.com

FAX: 801-355-0250

CONTACT INFORMATION

Name: _____ **Company:** _____ **Booth #/Sponsor:** _____

Address: _____
STREET CITY STATE ZIP

Phone: _____ **Fax:** _____ **E-mail:** _____

An acknowledgement of your room block will be sent directly to you by The Housing Connection. Please review all information for accuracy. You will not receive a confirmation from your hotel.

HOTEL PREFERENCE

Hotel preferences will be honored to the extent accommodations are available. Select from Baltimore Marriott Inner Harbor, Hilton Baltimore, Hyatt Regency Baltimore, Renaissance Baltimore Harborplace Hotel, Sheraton Inner Harbor Hotel. Refer to the hotel map for rates and locations.

First Choice: _____

Second Choice: _____

Third Choice: _____

If we are unable to secure your entire block in your first choice hotel, please (check one):
❍ Reserve all rooms in next available hotel ❍ Split the block between the hotels listed.

Comments: _____

If all three (3) choices are unavailable, please process this reservation according to (check one): ❍ Comparable Room Rate ❍ Proximity to Convention Center

ROOM BLOCK

Room block flow must be based on previous year's final room night pick up.

DAY/DATE	Friday 6/8	Saturday 6/9	Sunday 6/10	Monday 6/11	Tuesday 6/12	TOTAL
Standard Rooms						
1 Bedroom Suite						
2 Bedroom Suite						
Hospitality Suite						
TOTAL						

Special Request: _____

Hotel will honor special requests to the extent possible but requests are not guaranteed. Hotel will assign specific room types upon check-in based on availability. Suite availability and rates are available through The Housing Connection. Please call 877-505-0675 or 801-505-4613.

RESERVATION GUARANTEE

All reservation requests must be accompanied by a credit card guarantee or check for one night's room and tax deposit. Tax is currently 15.5% (subject to change). Hotel reservation forms received without a valid guarantee/deposit will not be processed. Faxed requests must include a valid credit card. Check deposits must be mailed with a completed hotel reservation form.

❍ American Express ❍ MasterCard ❍ Visa ❍ Discover ❍ Diner's Club ❍ Check*

Credit Card Number: _____ Expiration Date: _____

Signature: _____

*I hereby authorize The Housing Connection or any one of the participating hotels to process a charge to my credit card for each Room Deposit in accordance with the policies and information provided herein no sooner than May 17, 2012. If the charge to the credit card is denied, we reserve the right to release your reservation. *If paying by check, make check payable to The Housing Connection and mail payment with hotel reservation form to above address. Check should be in U.S. funds drawn on a U.S. bank. Wire Transfers will not be accepted.*

CANCELLATIONS/CHANGES

Cancellations and changes to the names of occupants or arrival and departure dates must be made directly with The Housing Connection. Cancellations after **April 12, 2012** will be subject to a $50.00 cancellation processing fee per reservations. If a cancellation occurs within two weeks of arrival, please refer to your hotel's individual cancellation policy found on your acknowledgement letter. Cancellations and changes can be emailed to **ASHP@housingregistration.com**.

Please sign below to indicate you are in agreement with the above outlined policies and procedures related to reserving a room block.

Signature: _____ **Date:** _____

Please keep a copy of this form. Make additional copies if needed.

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