

HOTEL RESERVATION FORM

34th International Convention May 25-30, 2005 Wyndham Phoenix (Convention Headquarters Hotel) If you **DO NOT** need housing, please fill out and return the CBTU Convention Registration Form ONLY. Photocopies are acceptable. DO NOT MAIL THIS FORM TO THE HOTEL

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Hotels

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Phoenix, Arizona

#### **Deposit Mailing Address**

Please complete and mail this hotel room reservation form along with your CBTU Convention Registration form and fees to:

**CBTU** Housing Bureau c/o GPCVB 400 E. Van Buren St. Ste. 600 Phoenix, AZ 85004

#### **HOTEL RESERVATION PROCESS**

Housing requests will not be processed without a complete Hotel Reservation form AND a complete CBTU Convention Registration form and fees.

#### HOTEL RESERVATION DEADLINE

Special CBTU Convention room rates are guaranteed based on availability.

Please make guest room reservations by April 25, 2005. CBTU Convention room reservations WILL NOT be accepted by telephone.

### **HOTEL RESERVATION DEPOSITS**

One night's room plus 12.07% tax (subject to change) is required to process each reservation request. Deposit payment may be made by check, money order, debit or credit cards. Deposits with a credit card will be processed after 5/12/05. Make check or money order payable to: **CBTU Housing Bureau** 

# ACKNOWLEDGEMENTS:

Please review all information for accuracy. The CBTU Housing Bureau system will generate an emailed, faxed or mailed acknowledgement after processing. If you do not receive your acknowledgement within 14 days, please contact the CBTU Housing Bureau immediately (602) 452-6269. You will not receive a confirmation from the hotel. Hotels receive reservation information after 5/12/05.

## **MODIFICATIONS - CANCELLATIONS:**

Continue to make, modify or cancel through 5/12/05, 4 pm MST via the Housing Bureau. Beginning 5/13/05, you should contact the hotels directly. Reservations secured by a check will be assessed a \$25.00 processing/cancellation fee if cancelled at any time. Rooms guaranteed with a credit card will be subject to a \$25.00 cancellation/processing fee after 4/25/05, 4 pm MST. Your full deposit will be forfeited if you do not cancel your entire reservation 72 hours prior to your scheduled arrival date.

HOTEL RESERVATION INFORMATION

	nces are not available, your reservation will be placed at another hotel.  contact CBTU National Office directly to inquire about suites.  Phone 202/429-1203				
CHECK TYPE OF CREDIT CAR	RD American Express Diners Club Discover Card MasterCard				
CREDIT CARD NUMBEREXPIRATION DATE One night's room and tax deposit will be charged to credit card after 5/12/05.					
NAME AS IT APPEARS ON CREDIT/DI	EBIT CARD (please print)				
SIGNATURE OF CARDHOLDER					
ARRIVAL DATE	DEPARTURE DATE				
Room type requested:	one bedtwo beds (based on availability at time of check-in)				
NAME OF PRIMARY ROOM OCCUPAN	ит				
NAME OF ROOMMATES					
ADDRESS					
СІТҮ	STATEZIP				
HOME TELEPHONE	WORK TELEPHONE				
FAX NUMBER	E-MAIL ADDRESS				
SMOKING PREFERENCE:	SmokingNon-Smoking				
SPECIAL NEEDS REQUEST (Please wri	ite in below any special ADA/disability accommodations required by any member of your party.)				
	RESERVATION CONFIRMATION TO: (Please print)				
NAME					
UNION AFFILIATE					
ADDRESS					
CITY	STATE ZIP				
HOME TELEPHONE	WORK TELEPHONE				
FAX NUMBER	E-MAIL ADDRESS				