

OFFICIAL HOUSING REQUEST FORM



2009 ELECTRIC POWER EVENT

MAY 12-14, 2009

DONALD E. STEPHENS CONVENTION CENTER

ROSEMONT, ILLINOIS

RESERVATION DEADLINE: MARCH 31, 2009

1 HOTEL

Arrival Date: _____

Departure Date: _____

Provide three hotel choices in order of preference from the attached hotel list.

1. _____
2. _____
3. _____

Hotel Selection Importance: Rate Location

Ambassadors reserves the right to assign hotels based on availability.

2 ROOM INFORMATION

Please supply names of all persons to occupy room and type of room. Note, four individuals is the maximum per room. Only one room per form, please make copies if necessary. Room occupants:

Single Dbl (2ppl/1 bed) Dbl/Dbl (2 ppl/2beds)

Smoking Non-smoking

Note: Room type & special requests based on availability at check in.

3 DEPOSIT INFORMATION

DEPOSIT: Reservations will not be processed without a guarantee of (1) night's room and tax deposit by credit card or check (add 13% room tax). Deposit is NON-REFUNDABLE if rooms are canceled within (7) days prior to arrival.

Guarantee with credit card:

Number: _____

Type: _____ Exp: _____

Name: _____

Signature: _____

Guarantee with check. Checks are accepted to reserve rooms but must accompany this form.

Make checks payable to: **Ambassadors**

MUST BE FILLED OUT

Send Confirmation to: (Please print clearly)

Name: _____

Company: _____

Address: _____

City: _____ State: _____

Zip: _____

Telephone: _____

Fax: _____

Email: _____

CONFERENCE DELEGATE EXHIBITOR

EXHIBITION VISITOR EXHIBITOR/DELEGATE

SPECIAL REQUESTS

I am in need of an ADA accessible room. I may need special assistance from hotel in event of an emergency.

Other, please list: _____

FIVE WAYS TO BOOK

Hotel Reservations

ONLINE: www.ELECTRICPOWERexpo.com

PHONE: 1-866-889-9645 (US)
+1-404-584-7458 (INTERNATIONAL)

FAX: 1-888-267-0943 (US)
+1-949-219-2316 (INTERNATIONAL)

EMAIL: ELECTRICPOWER2009@ambassadors.com

MAIL: ELECTRIC POWER 2009
c/o Ambassadors
240 Peachtree St., Suite 22-S-10
Atlanta, GA 30303

