



Official Housing Request Form: Society for Information Display (SID-2011)



Los Angeles, California May 15 - 20, 2011

The official housing closing date is April 15th, 2011. If you have not made reservations by this date, contact Globetrotter Travel, and every effort will be made to secure accommodations for you.

Fill out this form completely and mail or fax to:

Globetrotter Travel Management Services

18121 Georgia Avenue

Suite 104

Olney, Maryland USA 20832-1437

Toll Free U.S. and Canada 888-296-2967

International Callers 301-570-0800

PRESS 2 for Hotel or PRESS 1 for Flight Information



**Fax
301-570-9514**



**Email
sid@globetrottermgmt.com**



**Online Reservations and Hotel Maps/Descriptions
www.globetrottermgmt.com/sid0511**

| Hotel | Single | Double |
|---|-----------------|-----------------|
| 1) JW Marriott (Headquarter Hotel) | \$239.00 | \$239.00 |
| 2) Westin Bonaventure Hotel & Suites <i>Westin rate includes complimentary shuttle service to/from the convention center, free high speed internet, and discounted breakfast.</i> | \$211.00 | \$216.00 |
| 14.8% Occupancy and sales tax not included in room rates (Subject to change without notice) | | |

SID HOUSING RULES AND IMPORTANT DATES

| | |
|--|---|
| April 8, 2011 - Name receipt deadline | Globetrotter must have received the names of the occupants for each room reservation. Name changes are permitted, without charge up to the date of check in. Room reservations without named occupants will be cancelled. |
| April 15, 2011 - First night guarantee deadline | Up to this deadline, reservations may be cancelled without penalty. Reservations cancelled after this date will cause a minimum of one night's room and tax to be charged to the credit card listed below. |
| 72 hour - Full reservation guarantee deadline | Full or partial cancellations within 72 hrs of check-in date will be charged a max of two nights (room+tax) for two or more canceled nights or one night for one canceled night. |

Exhibitor **Attendee**

Occupant Information: (Each line represents 1 room unless otherwise specified)

Preferred Hotel Choice: (1)_____ (2)_____

Contact Information:

Name: _____

Company: _____

Address: _____

Address: _____

City _____ **State** _____ **ZIP** _____

Country _____

Phone: _____

Fax: _____

E-Mail _____

| Smoking | Number of People | Number of Beds | Name(s) of Occupant(s) | Arrival Date | Departure Date |
|---------|------------------|----------------|------------------------|--------------|----------------|
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I understand the terms and conditions of the SID Housing Rules and Important Dates and hereby authorize the credit card below to be charged for any deposits and or cancellation charges.*

****Valid Credit Card with expiration date through 7/2011 required.**

Credit Card Number:** _____ *Exp Date:** _____

***Cardholder's Name:** _____

***Cardholder's Signature:** _____