

INDY WELCOMES THE 2013 ADSA-ASAS JOINT ANNUAL MEETING

July 8-12, 2013

Hotel Reservation Form

GENERAL INFORMATION

Reservations can be made by choosing one of the following methods:

INTERNET: Book your reservation on-line at jtmtg.org/2013/. **This is the quickest and most effective method.**

FAX: Send completed form to 1.317.262.8270.

PHONE: Call 1.317.262.8191.

MAIL: The 2013 JAM Housing Bureau, 200 S. Capitol Ave., Ste. 300, Indianapolis, IN 46225.

All reservation requests will be made through the Housing Bureau. **DEADLINE: Monday, June 10, 2013.**

ACKNOWLEDGEMENTS: Acknowledgements will be sent after each reservation booking, modification and/or cancellation.

Review acknowledgements carefully for accuracy. If you do not receive an acknowledgement within 3 days after any transaction, please call the Housing Bureau at 1.317.262.8191.

MODIFICATIONS/CANCELLATIONS: Please review carefully. Reservation must be guaranteed by a valid credit card number. Checks will be deposited 7 days prior to arrival date. Credit card processing will be held until checkout. A \$25 cancellation fee will be charged for reservations cancelled on or after Tuesday, June 11, 2013. Reservations cancelled on Thursday, June 27, 2013, or no-shows, will be charged one night plus tax by the hotel.

MULTIPLE ROOMS: For reservations of 5 rooms or more, please request the sub-block agreement from Cara Tharp, carat@assochq.org or housing@visitindy.com.

HOTEL INFORMATION

Type of Room: 1 bed/1 person (1B/1P) _____ 1 bed/2 people (1B/2P) _____ 2 beds/2 people (2B/2P) _____
2 beds/3 people (2B/3P) _____ 2 beds/4 people (2B/4P) _____ Rollaway _____

Number of Rooms: _____ Arrival: _____ Departure: _____ Number of Nights: _____

Hotel Requested:	1B/1P	1B/2P	2B/2P	2B/3P	2B/4P
Westin Indianapolis (ASAS HQ)	_____ \$ 160	_____ \$ 160	_____ \$ 160	_____ \$ 170	_____ \$ 180
Hyatt Regency (ADSA HQ)	_____ \$ 160	_____ \$ 160	_____ \$ 160	_____ \$ 170	_____ \$ 180
Omni Severin	_____ \$ 165	_____ \$ 165	_____ \$ 165	_____ \$ 175	_____ \$ 185
Sheraton City Centre (Student HQ)	_____ \$ 145	_____ \$ 145	_____ \$ 145	_____ \$ 145	_____ \$ 145
Hampton Inn Downtown	_____ \$ 156	_____ \$ 156	_____ \$ 156	_____ \$ 156	_____ \$ 156
Crowne Plaza at Union Station	_____ \$ 155	_____ \$ 155	_____ \$ 155	_____ \$ 155	_____ \$ 155

Requests will be processed on a first-come, first-served basis. If all your choices are unavailable, we will contact you for alternative accommodation choices.

Special requests: Smoking Non-Smoking Handicapped Other _____ Requests are not guaranteed.

DELEGATE INFORMATION

First Name: _____ Initial: _____ Last Name: _____

E-Mail Address : _____ Company: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Daytime or Cell Phone: _____ Fax: _____

International Prefix and Area Code, If Necessary: _____

Contact Name for Groups: _____

Additional Guests in Room: 1. _____

2. _____

3. _____

PAYMENT INFORMATION

Credit Cards: Visa Mastercard American Express Discover Other _____

Card Number: _____ Expiration Date: _____

Name of Cardholder: _____ Signature: _____

By signing I authorize my credit card to be charged in compliance with the above referenced cancellation policies should I cancel my reservation.

Checks: Check Number: _____ Amount: _____

Make checks payable to The 2013 JAM Housing Bureau • 200 S. Capitol Ave., Ste. 300 • Indianapolis, IN 46225