



Institute of Electrical and Electronic Engineers (IEEE)

May 6, 2005 - May 13, 2005

<p>RESERVATION INFORMATION (Please type or print legibly)</p> <p>Accommodations will be occupied by:</p> <p>Name(s): Mr./Ms./Dr. _____</p> <p>Company _____</p> <p>Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Telephone (____) _____ - _____ Ext _____</p> <p>Fax (____) _____ - _____</p> <p>Email _____</p>	<p>Arrival Date _____ Departure Date _____</p> <p># of Nights _____</p> <p># of Adults _____</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px; text-align: center;"> <p>LIST ROOMMATES</p> <p>1. _____</p> <p>2. _____</p> </div>
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<p>CUTOFF DATE: Wednesday, April 6, 2005</p> <p>Please reserve your room before the cutoff date indicated above, by mailing or faxing this completed form to the address listed at the bottom of this page.</p> <p style="text-align: center;">Check-in time begins: 3:00pm Check-out time: 11:00am</p> <p>ROOM RATES ARE PER ROOM PER DAY:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"># Rooms</th> <th style="text-align: left;">Room Type</th> <th style="text-align: left;">Single/ Double Rate</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>Hotel Room</td> <td>\$140.00</td> </tr> <tr> <td>_____</td> <td>Mini-Suite</td> <td>\$185.00</td> </tr> </tbody> </table> <p>The charge for each additional person is \$15.00 per person per night. Children under eighteen (18) years of age may stay free in their parent's room using existing bedding. Additional bedding is \$15.00 per night per bed. (Limitations apply)</p> <p>Room rates are subject to combined taxes of 13.25% unless tax-exempt status has been approved – see tax-exempt information. Such tax is subject to change without notice.</p> <p>OTHER REQUESTS:</p> <p>The following are requests only and are on a first come first served basis.</p> <p style="padding-left: 40px;"> <input type="checkbox"/> King <input type="checkbox"/> 2 Double Beds <input type="checkbox"/> Smoking <input type="checkbox"/> Non Smoking </p> <p>ADDITIONAL INFORMATION:</p> <p style="padding-left: 40px;">For directions please visit the Hotel's website at www.PrimeHotelsandResorts.com/Saratoga</p> <p>Reservations for this event are NOT able to be booked via the internet.</p>	# Rooms	Room Type	Single/ Double Rate	_____	Hotel Room	\$140.00	_____	Mini-Suite	\$185.00	<p>RESERVATION GUARANTEE / DEPOSIT POLICY:</p> <p>All reservations must be guaranteed using a credit card or advance deposit.</p> <p>Guests will be penalized for early departure. All reservations must be guaranteed for the entire stay. Unless the reservation is changed prior to check-in, guests having an early departure will be charged the full room rate for their entire scheduled stay.</p> <p>Please send a check or money order in the amount of one night's stay; or indicate the appropriate credit card information below. <i>American Express, Visa, Master Card, Diner's Club or Carte Blanche</i> are all acceptable.</p> <p>Credit Card Company _____ Exp. Date _____</p> <p>Account Number _____</p> <p>Name of Card Holder _____</p> <p>Signature _____</p> <p>CANCELLATION POLICY:</p> <p>Cancellation less than forty-eight (48) hours prior to the scheduled arrival date will result in forfeiture of your deposit or if a credit card was used, a charge equal to one night's stay will be applied to the above credit card.</p> <p>TAX EXEMPT INFORMATION:</p> <p>If your exempt organization is paying for your stay the following information applies: A completed ST 119.1 form as well as a copy of your form of payment (Company Check or Company Credit Card) must be received with this form.</p> <p>If paying by personal check, credit card or cash, the following information applies: NYS Employees or Employees of its political subdivisions: A completed AC-946 form must be received with this form. Proper identification will need to be shown at check-in.</p> <p>US Government Employees: A completed ST-129 form must be received with this form. Proper identification will need to be shown at check-in.</p>
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<p>Group Code: 000284</p>	<p>Return this form to: The Prime Hotel & Conference Center Reservations Department, 534 Broadway, Saratoga Springs, NY 12866 518-584-4000 or 1-888-999-4711 • Reservations Fax Number: 518-584-7430</p>
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