



# Exhibitor Hotel Room Block Request Form

Please type or print.

CONTACT NAME \_\_\_\_\_

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_

COUNTRY \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EXT. \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

**Hotel Choices:** Please reference the list of official ACC.09 hotels to select your choices. List in order of preference:

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

In cases where choices can not be accommodated, please give preference to (check one):

Rate       Location       Quality

**Special Requests:** \_\_\_\_\_

**Room Block Request:** Indicate number of each type of room required below. You will have the ability to provide shoulder night room requirements online while managing your assigned block of rooms.

Standard Rooms \_\_\_\_\_

1-Bedroom Suites (2 rooms) \_\_\_\_\_

2-Bedroom Suites (3 rooms) \_\_\_\_\_

**Total:** \_\_\_\_\_

Check here if ADA (Americans with Disabilities Act) accommodation is desired. A Housing Center representative will contact you.

**Please specify ADA needs:** \_\_\_\_\_

Due **Friday, September 5, 2008** to be considered for priority placement. Forms received after Friday, September 5, 2008 will be processed on a first-come-first-served basis.

Room block assignments confirmed:

**Monday, October 13, 2008**

Rooming list and nonrefundable payment deadline:

**Wednesday, February 18, 2009**

Changes accepted by Housing Center through:

**Wednesday, March 4, 2009**

Changes should be made by contacting the hotel directly:

**Monday, March 9, 2009**

## Terms of Agreement

*Please review and sign below.*

Exhibitors are required to make housing arrangements through the ACC as part of their commitment to and support of the ACC. Exhibitors, who make reservations directly with hotels, bypassing the official housing process, will be in violation of regulations and will lose priority points.

I understand that should my company decide not to exhibit at ACC.09, ACC will cancel hotel blocks automatically. By signing this form, I also understand that room deposits equal to three nights' room and tax (or length of stay if under three nights) per room are **non-refundable after Wednesday, February 18, 2009.**

The allocation of rooms to exhibitors at certain hotels will be limited.

Note: Unsigned forms cannot be processed.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Please fax forms to:**

ACC Housing Center  
11208 Waples Mill Rd., Suite 112  
Fairfax, VA 22030  
Fax: (703) 631-1167

**Questions?**

Call the ACC Housing Center  
(800) 699-5113  
Outside the U.S. (703) 449-6418  
Email: [accexhibitorhousing@jspargo.com](mailto:accexhibitorhousing@jspargo.com)