



ROOM RESERVATION FORM

September 14, 15 & 16, 2009

<u>ROOM TYPE</u>	<u>PER NIGHT</u>
K = 1 KING BED	\$160.00 + Tax
Q = 2 QUEEN BEDS	\$160.00 + Tax

PWA USE ONLY	
MF []	WD []
RP []	SP []
# _____	

MANUFACTURERS ONLY: IMPORTANT INFORMATION: Your Meeting Room (which must be listed on the first line) **MUST** have a departure date of 9/17. **Should** your final Conference schedule allow you to depart by noon on 9/16, you will need to change your departure date with PWA before June 5th. Failure to list your departure date as 9/16 may cause scheduling problems and missed meeting opportunities.

Manufacturers only: PLEASE list the person who will be staying in your Meeting Room on the first line.

<u>PWA USE ONLY</u>	<u>ROOM TYPE</u> *	<u>NAME(S) OF PERSON(S) IN ROOM</u>	<u>ARRIVAL DATE</u>	<u>DEPART DATE</u>

(*) Please list all delegates. For Room Partners please list both names on the same line. If delegates are NOT staying at the Hotel, print MOA under Room Type.

SPECIAL NOTE: ALL Rooms are NON-SMOKING. All REQUESTS are subject to AVAILABILITY.

BY COMPLETING AND RETURNING THIS FORM YOU AGREE TO ALL OF THE TERMS.

Due to the Room Cancellation Clause required by the
Arizona Grand Resort the following rights are reserved:

When this room reservation form is received by the Arizona Grand Resort, the Resort will at that time charge your credit card for the cost of your room plus tax for each night for which you have reserved a room at the Resort. That payment to the Resort will be non-refundable in the event of a cancellation of one or all of your reserved room nights. If you are eligible for a credit, it will be at the sole discretion of the Resort based on their ability to rebook the room nights for which you have canceled. You will still be required to present a credit card at check-in to gain access to the Resort's ancillary services. By returning this room reservation form, you agree to these terms and agree not to contest any such charge to your credit card.

Deadline for changes to Room requirements is June 5th, at which time this form will be forwarded to the Resort for processing and billing.

SPECIAL NOTE: CHECK-IN TIME IS 4:00PM * CHECK-OUT TIME IS 12:00 NOON**

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Fax: (____) _____ - _____ Email: _____

All reservations must be guaranteed by credit card ONLY.

[] MasterCard [] VISA [] AMEX Expiration Date: _____

Card Number: - - - Security Code:

Print your Name: _____ Signature: _____

PLEASE RETURN FORM VIA FAX OR MAIL TO:

PWA
41-701 CORPORATE WAY #1
PALM DESERT, CA 92260
FAX: (760) 346-5847

PWA has blocked a specific amount of rooms for the PWA Conference.
PWA *cannot* guarantee that you will receive all of the rooms you have requested above.
PWA will do all we can to assist you in finding alternative hotels in the event we are over booked.
This form must be completed and received by PWA no later than April 17th.