

Reservation form downloaded from: <http://www.intermagconference.com> .

**INTERMAG 2003
HOTEL RESERVATION FORM
Boston Marriott Copley Place
Boston, Massachusetts, USA**

Call, mail or fax this form.

When calling, you must identify yourself as an attendee of the INTERMAG 2003 conference to receive the group room rate.

Intermag 2003

Boston Marriott Copley Place
110 Huntington Avenue
Boston, MA 02116 USA

☎ 1-800-228-9290

☎ Fax 1-617-587-5191

Reservation Deadline: March 07, 2003

Reservations made after March 07, 2003, will be confirmed subject to availability of space and special group rate.

Last Name		First Name
Institute/Organization		
Street Address		
City	State/Province	Zip/Postal Code
Country	Email	
Telephone	Fax	
Name of Guest (s) Sharing		
Arrival Date	Time of Arrival	
Departure Date	Length of stay/Nights	

Room Reservation: These non-commissioned rates are subject to a room tax, presently at 12.45%

- | | |
|--|---|
| <input type="checkbox"/> \$176 per night/Single room | <input type="checkbox"/> Additional person \$20 per night |
| <input type="checkbox"/> \$196 per night/Double room | |
| <input type="checkbox"/> Smoking | <input type="checkbox"/> Non-smoking |
| <input type="checkbox"/> Accessible | <input type="checkbox"/> King Size Bed <input type="checkbox"/> Double Beds |

A credit card or check / money order is required to guarantee reservation. Please indicate credit card type

- | | | |
|--------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> MasterCard | <input type="checkbox"/> Visa | <input type="checkbox"/> American Express |
| <input type="checkbox"/> Diners Club | <input type="checkbox"/> Discover | <input type="checkbox"/> Check / Money Order |

Card #: _____ Expiration: _____

Signature: _____