

Housing Reservation Form

Arrival Date _____ / _____ / _____ Departure Date _____ / _____ / _____



Oct 4 – 7, 2017
Indianapolis, IN

Instructions

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

Internet Book your reservation online by visiting www.AARC.org

Phone (317) 262-8191
Mon - Fri, 8:30 am – 5:00 pm Eastern Time

Fax Send a completed form, one copy per room request, to (317) 262-8270 (secure line)

Mail Send a completed form, one copy per room request, to:

AARC Housing Bureau
200 S. Capitol Ave., Ste. 300
Indianapolis, IN 46225

DO NOT E-MAIL Due to credit card protection laws, do not e-mail this form. No form with a credit card number will be accepted.

Deadlines/Room Rates/Taxes

To take advantage of the special conference rates, book your reservation **by Monday, September 11, 2017**. AARC can not guarantee discounted rates or availability at the conference hotels after that date. All rates are per room per night, and plus 17% tax (subject to change without notice).

Deposit

All hotels require a deposit of one night's room and tax with each reservation request. **Credit cards will be charged the non-refundable deposit on Tuesday, September 12.** Credit cards must be valid through October, 2017. If you mail a check for the non-refundable deposit, it should be made out to "AARC Housing Bureau" and mailed with your completed reservation form to the address above. Checks must be **received by Monday, September 11, 2017**.

Acknowledgements

Acknowledgements will be sent after each reservation booking, modification, or cancellation. Review it carefully for accuracy. If you do not receive an acknowledgement via e-mail within the same business day, please contact the Housing Bureau via the phone number above or e-mail housing@visitindy.com. You will not receive a written confirmation from the hotel.

Cancellation/No Show/Penalties

• AARC Housing Bureau must receive cancellations on or before Monday, August 14, 2017 to avoid any penalties. **Cancellations made from Tuesday, August 15 through Monday, September 11, 2017 will be assessed a \$50 cancellation fee.**

• Starting Tuesday, September 12, 2017, cancellations must be directed to your confirmed hotel. The hotel will retain the non-refundable deposit of one night room and tax.

• Your confirmed hotel may assess an early departure fee for departure date changes made after check in.

• If you do not cancel your reservation and/or do not show, the hotel will retain your non-refundable deposit and your reservation will be forfeited.

Changes

Please contact the AARC Housing Bureau with new reservations, changes or cancellations through Monday, September 11, 2017. Starting Tuesday, September 12, direct all changes to your confirmed hotel.

Hotel Selection: (Please number all of the hotels in order of preference.)

_____ JW Marriott Indianapolis, Co-Headquarters Hotel

_____ Indianapolis Downtown Marriott, Co-Headquarters Hotel

_____ Courtyard by Marriott Downtown

_____ Hyatt Regency Indianapolis

_____ SpringHill Suites by Marriott Downtown

_____ The Westin Indianapolis

Reservations will be processed on a first come, first served basis. If all hotels are sold out, you will be placed on a wait list until a room becomes available.

Please process this reservation according to (please check one):

Comparable room rate Proximity to conference site

Check one Attendee Exhibitor

Room Type

Number of people in room _____ Number of beds in room (one or two) _____

Special Requests ADA Other _____

All hotels are smoke free. Hotels will assign specific room types upon check in, based upon availability. Requests are not guaranteed. Send suite requests to housing@visitindy.com.

List all occupants in room (include yourself)

1. _____ 2. _____

3. _____ 4. _____

Hotel Reward # _____ **Hotel Brand** _____

Send Confirmation to (Fill out this portion completely)

Last _____ First _____

Phone _____ Fax _____

Company _____

Address _____

City _____ State _____ Zip Code _____

Country _____

Check the preferred method of delivery for your confirmation.

Mail (The address above is my home address work address.)

E-mail _____

Type of Card

American Express Visa Discover MasterCard

Other _____

Account # _____

Exp. Date _____

Card Holder Name (print) _____

Signature _____