



# Official SID Housing Request Form: Display Week



Seattle, Washington May 23 - 28, 2010

The official housing closing date is April 23rd, 2010. If you have not made reservations by this date, contact Globetrotter Travel, and every effort will be made to secure accommodations for you.

Fill out this form completely and mail or fax to:

**Globetrotter Travel Management Services**  
18121 Georgia Avenue  
Suite 104  
Olney, Maryland USA 20832-1437

**Toll Free U.S. and Canada 888-296-2967**  
**International Callers 301-570-0800**  
**PRESS 2 for Hotel or PRESS 1 for Flight Information**

**Fax 301-570-9514**      **Email sid@globetrottermgmt.com**

**Online Reservations and Hotel Maps/Descriptions**  
**www.globetrottermgmt.com/sid**

Hotel	Single	Double
1) Red Lion Hotel	\$187.00	\$187.00
2) Sheraton Seattle (Headquarters Hotel)	\$199.00	\$199.00
<b>Club Level:</b>	<b>\$229.00</b>	<b>\$229.00</b>
3) Grand Hyatt	\$209.00	\$229.00
4) Hyatt Olive 8	\$209.00	\$229.00

15.6% Occupancy and sales tax not included in room rates(Subject to change without notice)

### SID HOUSING GUIDELINES

In order to keep facility fees down, the Society for Information Display arranges contracts that combine rental of convention facilities and guarantee of a certain number of hotel room-nights at convention hotels. SID Symposium participants can help keep registration fees down this year and in the future by registering and staying in hotels listed in the SID registration information. Nevertheless, in response to the current economic situation, SID has relaxed its deadlines for hotel reservations to provide its attendees flexibility in scheduling their participation.

### IMPORTANT DATES

April 23, 2010 - Name receipt deadline	Globetrotter must have received the names of the occupants for each room reservation. Name changes are permitted, without charge up to the date of check in. Room reservations without named occupants will be cancelled.
April 30, 2010 - First night guarantee deadline	Up to this deadline, reservations may be cancelled without penalty. Reservations still in force on this date will be charged a one night, non-refundable deposit of room rate plus tax.
72 hour - Full reservation guarantee deadline	For any cancellations or date changes made within 72 hours of the checkin date, a full charge for all reserved room nights plus tax will be applied. The one-night deposit previously charged will be credited against this charge.

**Exhibitor**       **Attendee**

### Contact Information:

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Country \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail \_\_\_\_\_

### Occupant Information: (Each line represents 1 room unless otherwise specified)

Preferred Hotel Choice: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

Smoking	Number of People	Number of Beds	Name(s) of Occupant(s)	Arrival Date	Departure Date

Special Requests (please circle): Roll-a-way Handicapped Accessible Other \_\_\_\_\_

Valid Credit Card with expiration date through 7/2010 required.

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Check Enclosed: \_\_\_\_\_ Check# \_\_\_\_\_