

HOTEL RESERVATION FORM

Twelfth Topical Conference on
Radio Frequency Power In Plasmas • April 1-3, 1997

Savannah Marriott - Riverfront
Savannah, Georgia

The deadline for reserving a hotel room at the conference rate is **March 3, 1997**.

Last Name: _____ First Name: _____ Middle Initial: _____

Affiliation: _____

Address: _____

City: _____ State: _____ Country: _____ Postal Code: _____

Phone: _____ Fax: _____

Email Address: _____

ROOM REQUIREMENTS

Arrival Date: _____ Room Type: single double other _____

Departure Date: _____ Number of Rooms Required: _____

Smoking Non-Smoking Special Requirements: _____

PAYMENT OF HOTEL DEPOSIT

I hereby authorize the Savannah Marriott to debit my credit card for the first nights deposit at \$82 for single and \$92 for double + 12% tax.

Credit Card Type: _____

Credit Card No.: _____

Expiration Date: _____

Signature of Credit Card Holder/Date

All reservations will be held after 6:00 p.m. and guaranteed for late arrival only if accompanied by a first night room deposit or guaranteed to a major credit card.

The Savannah Marriott will hold 20 rooms at the government rate. If you need the government rate, please call Ms. Gwen White at 423-574-0964.

Parking:

The Savannah Marriott Riverfront Hotel offers ample parking for the conference attendees at the rate of \$7.00 per day, per vehicle.

***Checks should be mailed directly to hotel**

Please mail or fax this form to the Savannah Marriott Riverfront, 100 General McIntosh Boulevard,
Savannah, Georgia 31401 (Phone: 912-233-7722) (Fax: 912-233-3765)