

# 2010 Dallas Leadership Summit



SEPTEMBER 9-11

Wed	Thu	Fri	Sat
8	9	10	11

**THURSDAY** - ED Banquet  
**FRIDAY** - Sessions 1 & 2  
**SATURDAY** - Sessions 3 & 4

## HOST HOTEL ROOM RESERVATIONS

**AMERICAN AIRLINES CENTER [2500 VICTORY AVE.]**

Please note, you can only make a maximum of two room reservations per Associate and/or per credit card. And a three-night minimum stay is required through the Pre-Paid Legal room block.

Incomplete forms will not be processed. Suite reservations will be charged in full upon receipt of reservation form. Deposits on standard rooms will be charged June 7. Deposits on standard room reservations after June 7 will be charged upon receipt of reservation form.

**HYATT REGENCY [300 REUNION BLVD.]**

NUMBER of ROOMS	ROOM RATE	RATE W/TAX
___ King	\$159	\$182.85
___ Double	\$159	\$182.85

There is an extra \$23 per night charge for triple/quad occupancy.

**SHERATON [400 N. OLIVE ST.]**

NUMBER of ROOMS	ROOM RATE	RATE W/TAX
___ Double	\$154	\$177.10
___ King	\$154	\$177.10

Suites are subject to availability and must be paid in full at the time of reservation.

___ Executive	\$250	\$287.50
[King bed w/living area, work area and dining table for 4]		
___ Dallas	\$375	\$431.25
[Bedroom and master bath w/separate living area and guest bathroom]		
___ Presidential	\$900	\$1,035.00
[Two bedrooms with open living room and dining area]		

There is an extra \$23 per night charge for triple/quad occupancy.  
 \_\_\_ Additional guests in room

**Check In Date** \_\_\_\_\_ **Check Out Date** \_\_\_\_\_

Any additional nights before Sept. 8 or after Sept. 11 are not available through the company's room block. These dates must be booked separately by contacting the host hotel directly.

Associate Number \_\_\_\_\_

Associate Name \_\_\_\_\_

Additional Guests Names \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Alternate phone \_\_\_\_\_

Email address \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

To hold my reservation for a standard room, I authorize you to immediately charge my account in the amount of \$ \_\_\_\_\_ as a deposit which is an amount equal to one night's room and tax for each room I have requested. I authorize you to charge my account on August 6, 2010 which is the remaining balance for each room (rate w/tax multiplied by the total room nights). I understand that any change request or cancellation must be submitted in writing to **adatravel@pplsi.com**. Cancellations will include any full or partial cancellations or change requests. Any cancellation/change request received before July 30, 2010, may result in fees from \$25 up to 50% of your deposit. After July 30, 2010, any changes to or cancellations of my room reservation may result in fees from \$25 up to the full cost of my stay. **I authorize you to charge my card in full for the amount of \$ \_\_\_\_\_ for my suite.** I understand that any cancellations of suites could result in the same penalties that apply for a standard room.

Signature \_\_\_\_\_

Please keep a copy of this form for your records and make note of the charge date. This is the only notice you will have of the charge amount and date. Remember, room types are subject to availability as a limited number of suites are available. Requests are processed in the order received, and if your suite is not available, you will be booked in a King room unless you note otherwise.

NOTE: No changes will be made after August 31, 2010.

I am supporting the \_\_\_\_\_ team/organization's **Breakout Session** by staying at the Host Hotel.  
NAME OF TEAM or ORGANIZATION

**PLEASE FAX YOUR COMPLETED FORM TO 580-436-0139.**