

SEPTEMBER 8-10



Specialized Training Specialized Training & ED Banquet Sessions 1 & 2 Sessions 3 & 4

reservation form

A two-night minimum stay is required through the Pre-Paid Legal room block. Incomplete forms will not be processed. Deposits on standard rooms will be charged upon receipt of reservation form. Suite reservations are available upon request only and half the amount due will be charged upon receipt of the reservation form. All balances for suites and standard rooms will be due on July 21st.

HYATT REGENCY [300 REUNION BLVD.]

NUMBER of ROOMS	- ROOM RATE	- RATE W/TAX
King	\$139	\$159.85
Double	\$139	\$159.85
Triple/Quad	\$159	\$182.85

Suites are subject to availability and half the amount due will be charged upon receipt of the reservation form.

	Sunset Suite	\$330	\$379.50
	King bed w/living	area, parlor, table and wet	bar [951 sq ft]
	Horizon Suite	\$330	\$379.50
King bed w/living area, parlor, table and v			bar [851 sq ft]
	Penthouse Suite	\$495	\$569.25
	1 or 2 bedrooms v	v/sitting and work area, ba	ar and fridge [980 sq ft]

Check Out Date Check In Date

SHERATON [400 N. OLIVE ST.]

NUMBER of ROOMS	ROOM RATE	RATE W/TAX
Double	\$112	\$131.60
King	\$112	\$131.60

Suites are subject to availability and half the amount due will be charged upon receipt of the reservation form. *~~~ **7**

	Executive	\$250	\$293.75
King bed w/living area, work area and dining ta			s table for 4
	Dallas	\$375	\$440.63
	Bedroom, master bath w/separate living area and guest bathroom		
	Presidential	\$900	\$1,057.50
	Two bedrooms with open living room and dining area		

Check In Date ____ Check Out Date ____

Any additional nights before Sept. 6 or after Sept. 10 are not available through the company's room block. These dates must be booked separately by contacting the host hotel directly.

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 July 21, 2011 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. Any cancellation/change request received before July 21, 2011, may result in fees from \$25 up to 50% of your deposit. After July 21, 2011, 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 for \$_____, half the amount due for my suite. I understand that any cancellations of suites could result in the same penalties that apply for a standard room.

Signature _

Associate Number ____ Associate Name

Additional Guests Names ____

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, 2011.

Two daily DART passes will be provided for each room night booked.

I am supporting the ___

NAME of TEAM or ORGANIZATION

_team/organization's Breakout Session by staying at the Host Hotel.

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