## JSM 2019 HOUSING RESERVATION INSTRUCTIONS AND FORM

July 27-August 1, 2019 • Denver, CO

Reservations must be made through the Denver CVB/Experient Housing Bureau online, by fax, or by mail. All reservation requests must be received by **July 3** to guarantee convention rates. *Do not send forms to the ASA office or contact hotels directly*. Forms must be faxed to (888) 772-1888 or mailed to Experient/JSM Housing, 5202 President Court, Suite G100, Frederick, MD 21703.

**DEPOSIT:** All reservation requests must be accompanied by a credit card *guarantee*. The credit card must have an expiration date after August 2019. Housing forms received without valid and complete credit card information will not be processed.

**ONLY ONE ROOM** may be requested on each form. You may photocopy the form if you need additional rooms.

fail to provide sufficient ID.

CHANGES/QUESTIONS: Changes and cancellations may be made until July 3 by telephone at (800) 465-5411 (Monday—Friday, 8:00 a.m.—5:00 p.m. EDT or email at <a href="mailto:jsm@experient-inc.com">jsm@experient-inc.com</a>. Always indicate you are attending JSM and have your acknowledgement number ready. On July 3, reservation data will be transferred to the hotels and the JSM Housing Bureau will no longer be able to make reservation changes. As of July 9 (and not before), event hotels will be able to assist with reservation changes and cancellations directly.

**ACKNOWLEDGEMENT**: Acknowledgements will be emailed after your reservation has been made. You will not receive a confirmation from your hotel. Reservations are assigned on a first-come, first-served basis and according to room availability.

**CANCELLATIONS:** Failure to cancel your reservation more than 72 hours in advance of your scheduled arrival or failure to arrive on your scheduled date will result in the hotel charging the credit card on file for one night's room and tax. Some hotels charge a penalty for checking out earlier than scheduled. To avoid this, please verify your departure date during check-in.

To ensure your request is handled efficiently, please clearly PRINT or TYPE all information on the form or a reasonable facsimile. You can expect delays processing reservation requests due to heavy volume in May.

ARRIVAL DATE	DEPARTURE DATE	TYPE OF ACCOMMODATIONS REQUESTED
Court No.		☐ Single (one bed, one person)
First/Given	Last/Family	☐ Double (one bed, two people)
Email Address*Email address required for reservation acknowledgments.		☐ Double/Double (two beds, two people)
*Email address required for reservation acknowledgments.		☐ Triple (two beds, three people)
Company		Quad (two beds, four people)
		□ Suite: One or two bedrooms
		☐ Nonsmoking ☐ Smoking (Many hotels are ALL nonsmoking.)
City	State	☐ ADA accessible
Country	ZIP/Postal Code	If requesting ADA accessibility, please provide details so your needs may be best accommodated.
Daytime Phone	Fax	be best accommodated.
Please list roommates:		☐ Government Rate
1)		OTHER (available upon request and availability)
3)		☐ Rollaway bed (not available in rooms with two beds)
HOTEL CHOICES: Write out hotel name (see hotel rates and map): 1 2 3		☐ Connecting rooms
		☐ Crib ☐ Refrigerator ☐ Microwave
		PAYMENT INFORMATION
If your choices are not available, indicate the factor most important to you:		☐ VISA ☐ MasterCard ☐ American Express
☐ Lowest rate available	☐ US federal government per diem	☐ Discover ☐ Diners Club
☐ Hotel close to the Colorado Convention Center		Name of Cardholder
☐ Special requests		reality of Cardiforder
		Credit Card Number
required to provide sufficien	S federal government per diem rate will be at identification upon check-in. Event hotels	Exp. Date
0 00	the per diem rate or the special negotiated  ok at the federal government per diem rate but	Signature of Cardholder