

# HOUSING/CATHOLIC UNIVERSITY OF AMERICA

## 2002 Spring Meeting

28 - 31 May 2002 Washington, D.C.

This form is to be used by students or attendees from developing countries who wish to stay at Catholic University. Please complete sections 1, 2, and 3 below. All reservations must be made by sending this form by mail or fax with **full payment**.

AGU will acknowledge receipt of your reservation within 14 days. Confirmation will be sent to the individual below. **Reservation must be made by 19 April 2002.**

**1. Please use a separate form for each room request. This form may be copied. Print or type all information.**

Last/Family Name \_\_\_\_\_ First/Given Name \_\_\_\_\_ MI- \_\_\_\_\_  
Organization/Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
E-mail \_\_\_\_\_ Telephone\* \_\_\_\_\_ Fax\* \_\_\_\_\_  
\* International numbers should include country and city codes.

**2. Reservation Information. Accommodations will be at Catholic University.**

List Full Names of all Room Occupants:

1. \_\_\_\_\_ 2. \_\_\_\_\_

Special Requests:  Handicapped Accessible  Non-smoking  Other: \_\_\_\_\_

For each date listed below, please  the nights you will require a room. Each room night requested includes the breakfast meal plan.

	Room night
Saturday, 25 May	<input type="checkbox"/>
Sunday, 26 May	<input type="checkbox"/>
Monday, 27 May	<input type="checkbox"/>
Tuesday, 28 May	<input type="checkbox"/>
Wednesday, 29 May	<input type="checkbox"/>
Thursday, 30 May	<input type="checkbox"/>
Friday, 31 May	<input type="checkbox"/>
Saturday, 1 June	<input type="checkbox"/>
TOTALS	_____

Room Request: (Please  only one)

Single (1 bed/1 person): \$50.00 per night x \_\_\_\_\_ nights = \$ \_\_\_\_\_

Double (2 beds/2 people): \$86.00 per night x \_\_\_\_\_ nights = \$ \_\_\_\_\_

TOTAL AMOUNT: \$ \_\_\_\_\_

Send form and full payment to:

2002 Spring Meeting  
CUA Housing  
AGU  
2000 Florida Ave., NW  
Washington, DC 20009  
Fax: +1-202-328-0566  
(Faxes must have credit card information)  
Phone:  
+1-202-777-7332  
Local and International calls:  
+1-202-462-6900

**HOUSING  
DEADLINE:  
19 April 2002**

**Change/Cancellation Policy:**

Changes or cancellations must be made in writing directly to AGU. Cancellations for full refund must be made by 19 April 2002. Cancellations between 19 April and 3 May are subject to a \$20.00 cancellation fee. **No refunds will be made after 3 May 2002.**

In order to avoid penalties, all changes must be made directly to AGU prior to 22 April. AGU will change your reservation for a \$20 change fee. No changes will be made after 22 April.

**3. Payment Information: (Please  one). Full payment by check or credit card must accompany this form.**

Charge to:  VISA  MasterCard  American Express  Check (payable to AGU)

Card Number \_\_\_\_\_ Exp. \_\_\_\_\_ Signature \_\_\_\_\_

Visit the AGU Web Site (<http://www.agu.org/sm02top.html>) for Complete Meeting Information.