SAN FRANCISCO 2009 AAO • PAAO

Subspecialty Day 2009 San Francisco October 23 – 24

HOUSING OPENS:
June 24 for Academy, PAAO and AAOE Members
July 15 for Nonmembers

Official Housing Form

ADDITIONAL INFORMATION All reservations will be confirmed via e-mail, fax or mail within 72 hours. If you don't receive your confirmation within one week, please contact the AAO Housing Office immediately. For all reservation inquiries, changes and cancellations, contact the AAO Housing Office by e-mail at aaohousing@expovision.com, or by phone, fax or mail. All reservation requests must be received by Monday, September 21.

You are not automatically registered for the 2009 Joint Meeting when you make a hotel reservation. Visit www.aao.org/2009 to register.

1 TO MAKE RESERVATIONS

Book online and check availability at www.aao.org/2009
- This is the most efficient way to obtain housing, with immediate confirmation provided.

By Mail—Complete form and send with check or credit card information to:
AAO Housing
c/o Expovision
3141 Fairview Park Drive, Suite 550
Falls Church, VA 22042, USA

RESERVATION DEADLINE: MONDAY, SEPTEMBER 21

By Fax—Complete form and fax with credit card information to:
1.703.770.3909. Note: This fax number will not accept faxes before June 24. Receipt of faxes cannot be confirmed by phone.

By Phone—Please have completed form and credit card information before calling.
Toll Free: **1.866.774.0487** (from within U.S. and Canada)
Phone: **1.703.770.3908**

2 CONTACT INFORMATION

Contact Name

Address

City | State/Province | ZIP/Postal Code

Country | E-mail Address

Telephone Number | Fax Number

3 RESERVATION INFORMATION

☐ **American Academy of Ophthalmology Member** ☐ **PAAO Member** ☐ **AAOE Member** ☐ **Nonmember**

Academy ID# ☐☐☐☐☐☐

Name of Occupant | Share With

Arrival Date | Departure Date

4 HOTEL PREFERENCE

1. _____ 4. _____
2. _____ 5. _____
3. _____ 6. _____

All room assignments will be made in the order received. If your hotel choices are unavailable, the AAO Housing Office will make an assignment as comparable as possible to your preference and waitlist you for your preferred hotel.

Price Range: $ _____ **to $** _____

5 ACCOMMODATIONS REQUESTED

☐ **ADA (Americans with Disabilities Act)** Please check if you require a room equipped for special needs.

◯ **Single** (1 Bed/1 Person) ◯ **Double** (1 Bed/2 People) ◯ **Double/Double** (2 Beds/2 People)

Additional information *(frequent guest number, non-smoking room, etc.)* _____

Please note that room types and special requests, including smoking preferences, are subject to availability and cannot be guaranteed.
For suite reservations, contact the AAO Housing Office directly at **1.866.774.0487** *or* **1.703.770.3908**.

6 DEPOSIT INFORMATION (Deposits are 100% refundable if cancelled by September 21, 2009)

All room reservations require a deposit between $175 and $425. Refer to the 2009 Joint Meeting Official Hotels list for individual deposits. **Credit Cards will be charged the deposit immediately at the time of booking.** Cards Accepted: American Express, VISA, MasterCard, and Discover.

Charge the following credit card number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiration Date | ZIP/Postal code of credit card billing address

Authorized Signature | Print Name

Or pay by check: **Make check payable to AAO Housing** Check # _____ *(Check must be attached)*