

Music Teachers National Association
Albuquerque, NM
March 17, 2010 – March 24, 2010

HOTEL RESERVATION FORM

INSTRUCTIONS

Reservations can be made beginning September 16, 2009 by choosing one of the following methods.

FAX

FAX a completed form, one copy per room to
505-346-0176

MAIL

Send a completed form, one copy per room to
 ABQ Housing Services
 800 20th St. NW
 Suite B, Albuquerque, NM 87104

INQUIRIES:

Call (505) 346-0522

Or e-mail reservations@abqhousingservice.com

Please note the phone number on this form is for inquiries/assistance only. Reservation requests must be made by fax or online.

CONFIRMATIONS

Confirmations will be sent after each reservation booking, modification and/or cancellation. **Review it carefully for accuracy.** If you do not receive a confirmation via e-mail, fax, or mail within 14 days after *any* transaction, please contact ABQ Housing at the number listed above.

ROOM RATES/TAXES

To take advantage of the **Music Teachers National Association** rates, be sure to book your reservation by **February 18, 2010**. After this date, room availability or conference rates may not be available and the hotels may charge significantly higher rates. All rates are per room per night and are subject to a 12.875% tax (subject to change). Hotels may charge additional fees for rooms with more than one occupant. When making a reservation, please provide room and bedding preferences in the Special Needs section of the Housing Form. The hotels will assign specific room types upon check in, based upon availability. **Please be advised that requests are not guaranteed.**

MODIFICATION/CANCELLATION

For new reservations or modifications, you may continue to make reservations from **September 16, 2009** through **February 18, 2010** via ABQ Housing Services. **Reservations secured by credit card may be modified and/or cancelled without penalty from open date through cut-off date, after which, cancellations will be assessed a \$25.00 processing fee. Reservations made after cut-off date and cancelled are also subject to the \$25.00 processing fee.** Please be aware of the individual hotel cancellation policy requires 24 hours cancellation prior to arrival in order to receive a deposit refund.

HOTEL INFORMATION

Arrival Date: _____

Departure Date: _____

List choices in order of 1 – 2 (#1 being the most preferred)

<u>RANK</u>	<u>HOTEL</u>	<u>Single</u>	<u>Double</u>	<u>Triple</u>	<u>Quad</u>
___	Doubletree	\$ 149	\$ 149	\$ 169	\$ 169
___	Embassy Suites	\$ 162	\$ 162	\$ 172	\$ 172
___	Hyatt Regency	\$ 164	\$ 164	\$ 189	\$ 214

Reservations will be processed on a first come, first serve basis. If requested hotel(s) are unavailable, reservation will be processed according to proximity to conference site.

Room Type: (please fill out both)

Number of people in room: _____

Number of beds in room: _____

List all occupants in room: (Include yourself)

1. _____
2. _____
3. _____
4. _____

Special Needs: _____

- o Smoking o Non-Smoking

DEPOSIT INFORMATION

All reservations must be guaranteed by a major credit card. I understand that if I do not arrive or cancel within 24 hours of my arrival date, I will be liable for my first night's deposit. *(Confirmation from the ABQ Housing Services will contain specific hotel cancellation policy.)*

Signed: _____

Credit Card

Please be advised that the credit card must be valid through the dates of the conference

Type of card:

- American Express
 MasterCard
 Visa
 Other _____

Account Number: _____

Expiration Date: _____

NAME OF CARDHOLDER

CARDHOLDER'S SIGNATURE

SEND CONFIRMATION TO: (FILL THIS PORTION COMPLETELY)

NAME:

First: _____ MI: _____ Last: _____

Company: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Country: _____

E-mail: _____

Phone: _____ Fax: _____

If outside the USA, please also include country and city codes.

**SEND YOUR FORM TO
 ABQ HOUSING SERVICES**

PLEASE USE ONE FORM PER ROOM. MAKE COPIES AS NEEDED