



Reservation Form

2012 IPPFA Illinois Spring Pension Conference
 Tuesday, May 15 – Friday, May 18, 2012

I plan to arrive on _____ I will depart on _____
 Day/Date Day/Date

INDICATE ACCOMODATIONS DESIRED WITH A CHECK MARK:

- | | |
|---|--------------|
| <input type="checkbox"/> \$102.99 Single Standard Level | Plus 12% tax |
| <input type="checkbox"/> \$102.99 Double Standard Level | Plus 12% tax |
| <input type="checkbox"/> \$114.99 Triple Standard Level | Plus 12% tax |
| <input type="checkbox"/> \$126.99 Quad Standard Level | Plus 12% tax |
|
 | |
| <input type="checkbox"/> \$15 Rollaway Bed (only allowed in king rooms) | |
| <input type="checkbox"/> Two Double Beds | |
| <input type="checkbox"/> One King Bed | |

Sharing with _____ Anticipated arrival time at hotel _____

Special Requests _____

Please note: Check-in time is **3:00 p.m.** Check-out time is **12:00 Noon.**

Requests for reservations must be received by **Monday, April 23, 2012** to assure room and rate availability.

Reservations will not be confirmed without including either an accepted credit card number and signature or a first night's room & tax.

Deposit enclosed _____ Card Number _____ Exp. _____
 American Express-Visa-Mastercard-Diners-Carte Blanche-Discover. Please circle card used.

Name _____

Address _____

City/State/Zip _____

Phone _____

Fax _____

E-mail _____

Signature _____