

# CONAGERIE ROOM RESERVATION FORM

Make your sleeping room reservations for CONAGERIE via one of the following four methods:

- Via phone - Call the hotel direct to make a reservation at 310/670-9000 or the Radisson Reservation Center toll-free at 800/333-3333 (credit card guarantees only). **Please note that suite reservations will not be taken over the telephone!**
- Via fax - Complete this form fax it to 310/337-6555 (credit card guarantees only)
- Via mail - Complete this form and mail it to the Radisson Hotel at LAX, 6225 West Century Blvd., Los Angeles, CA 90045 (credit card, check or money order guarantee).
- Via the Internet – Access the Radisson LAX web page through the Radisson.com web site. Click on “make a reservation” and enter Westercon’s group code *scifi*. **Please note that suite reservations will not be taken over the Internet!**

**Westercon dates: July 4-7, 2002**

NAME: \_\_\_\_\_ MEMBERSHIP NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/PROVINCE: \_\_\_\_\_ ZIP/POSTAL CODE: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ DAYTIME PHONE: ( ) \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

ARRIVAL DATE & TIME:

DEPARTURE DATE:

ROOMMATE #1 NAME: \_\_\_\_\_ CHILD? Yes/No CHILD'S AGE: \_\_\_\_\_

ROOMMATE #2 NAME: \_\_\_\_\_ CHILD? Yes/No CHILD'S AGE: \_\_\_\_\_

ROOMMATE #3 NAME: \_\_\_\_\_ CHILD? Yes/No CHILD'S AGE: \_\_\_\_\_

RADISSON GOLD REWARD CARD#: \_\_\_\_\_

## ROOM TYPE SELECTION

- SINGLE (\$95)     DOUBLE (\$95) (2 People, 1 bed)     DOUBLE DOUBLE (\$95) (2 people, 2 beds)     TRIPLE (\$95) (3 people, 2 beds)     QUAD (\$95) (4 people, 2 beds)

*All rooms are subject to applicable taxes currently in the total amount of 14.1%*

- HANDICAP ACCESS REQUIRED     NON SMOKING ROOM REQUESTED     NON-QUIET FLOOR     QUIET FLOOR

*If a floor type is not designated, you will be assigned to whichever floor is appropriate to our block*

Special requests: \_\_\_\_\_

## ROOM DEPOSIT/GUARANTEE PAYMENT

- Check     Money Order     Visa     MasterCard     American Express     Diners Club     Discover

CARD NUMBER# \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

## SUITE REQUESTS check here if a suite is requested

Please complete this form and attached a note outlining your room requirements and send them to CONAGERIE SUITES, c/o SCIFI, P.O. Box 8442, Van Nuys, CA 91409.