HOUSING APPLICATION AND RESERVATION FORM
42nd Annual Drosophila Research Conference
March 21–March 25, 2001

DEADLINE FOR RECEIPT OF RESERVATIONS: FEBRUARY 16, 2001

BY FAX: 1-(202) 387-5397

BY TELEPHONE: 1-(202) 328-2000, ext. 8822

[NOTE: If you call Marriott's central reservations using their toll free telephone number, Conference rates may not be quoted since they may not be in central reservations' database.]

• Do NOT mail and fax this form, as it may result in a duplicate reservation. Reserve early! Space is limited.

• If you are making reservations for MORE than one room, this form may be photocopied. Only ONE room reservation can be made per application form. All individuals sharing this ONE room should be listed below.

• Confirmations will be mailed by the hotel by late February, ONLY to the 1st person named below. First person named below is responsible for making and providing copies to individuals sharing the room.

• Reservations will be processed on a first-come, first-served basis. Once the Marriott Drosophila room block is sold out, your reservation request will be referred directly to the Omni Shoreham Hotel. Omni Shoreham hotel reservations (202) 234-0700

*INDIVIDUALS LISTED BELOW IN THE “SHARING WITH” SECTION SHOULD NOT SUBMIT SEPARATE RESERVATION FORMS. THIS COULD RESULT IN DUPLICATE RESERVATIONS AND NO-SHOW CHARGES BY THE HOTEL.

NAME OF INDIVIDUAL TO WHOM CONFIRMATION SHOULD BE SENT: (Separate confirmations will NOT be sent to individuals listed as sharing the room.)
1st Person
First Name  M.I. Last Name
Dept and Institution
Street Address or P.O. Box Number
City    State    Zip/Mail Code                Country
Area Code    Daytime Phone Number
Area Code                     FAX Number
E-mail Address

ARRIVAL: Date                  DEPARTURE: Date
Check-in time is 3:00 pm. Checkout time is 12:00 PM.

ROOM TYPE:  Please check only ONE box to indicate room type requested. King-sized beds and rollaways may be requested but are not guaranteed to be available. State and local taxes of 14.5% are not included in rates shown and will be added.

Single (1 person, 1 bed) □ Std $191 □ Concierge Level $211 □ Wardman Tower $221
King (2 persons, 1 king-sized bed) □ Std $214 □ Concierge Level $234 □ Wardman Tower $244
Double (2 persons, 2 double beds) □ Std $214 □ Concierge Level $234 □ Wardman Tower $244
Triple (3 persons, 2 double beds) □ Std $244 □ Concierge Level $264 □ Wardman Tower $274
Quad (4 persons, 2 double beds) □ Std $274 □ Concierge Level $294 □ Wardman Tower $304
(For each person in addition to the 4th, add $30)

Suites: Contact Marriott Wardman Reservations at (202) 328-2000, ext 8822

□ Smoking □ Non-smoking □ Disabled Room □ Other special requests__________________________

SHARING ROOM WITH: (Individuals listed below should NOT submit separate reservation forms because duplicate reservations could result, causing automatic cancellation of reservations, or no-show charges by the hotel! Confirmation will be sent ONLY to 1st person named above.) If more than one person occupies a room, specify roommate names below:
2nd person_________________________________ 3rd person_________________________________
4th person_________________________________

ROOM RESERVATION GUARANTEE AND CANCELLATION: Reservation must be guaranteed with one-night’s room deposit by major credit card. Cancellations must be made by noon, eight (8) days prior to the scheduled arrival date to receive credit for the one-night’s room deposit.

Card Type__________________________ Card #__________________________ Exp Date:__________________________
EXACT name on card __________________________________________________ Signature:____________________________________

[Signature of Applicable Individual]

[Date]

[Address of Applicable Individual]

[City, State, Zip Code]