BUILDING A NEW TOMORROW

BCMC 2002 HOUSING FORM

Oct. 16-18 • Columbus, Ohio • Greater Columbus Convention Center

The Columbus Housing Bureau will make hotel accommodations using one of the three options shown below. Questions? Please email **housing@columbuscvb.org**

Reservations can be made between 2/17/02 and 10/8/02 by choosing one of the following methods:

INTERNET

Book your reservation on-line using the show web site at: **www.bcmcshow.com**

FAX

Send a completed form, one copy per room to: **614/222-6140.**

MAIL

Reservations must be received by 9/25/02. Send a completed form, one copy per room to:

Greater Columbus Convention & Visitors Bureau, Attention: Housing
90 North High Street
Columbus, OH 43215

ACKNOWLEDGMENTS

Acknowledgments will be sent after each reservation booking, modification and/or cancellation. Review it carefully for accuracy. If you do not receive an acknowledgment via email, fax, or mail within 14 days after ***any*** transaction, please contact the Housing Bureau at 1-800/354-2657. You will not receive a confirmation from the hotel.

ROOM RATES/TAXES

To take advantage of the special BCMC Convention rates, be sure to book your reservation by **9/13/02**. *After this date, the official BCMC blocks will be released and the hotels may charge significantly higher rates.* All rates are per room, per night and are subject to a 15.75% tax (subject to change). The Hotels will assign specific room types upon check-in, based upon availability. PLEASE BE ADVISED THAT REQUESTS ARE NOT GUARANTEED.

MODIFICATIONS/ CANCELLATIONS

Continue to make, modify and/or cancel reservations from 2/17/02 through 9/25/02 via the mail, fax or internet. Beginning 9/26/02, you may call the hotels directly.

Cancellation Policy: Rooms cancelled after 9/13/02 will be subject to a $25 cancellation fee. Rooms cancelled after 9/25/02 may be subject to a first night room rate and tax charge. Cancellation policies may vary at different hotels. See your acknowledgment for specific cancellation policies.

HOTEL INFORMATION

_____
ARRIVAL DATE

_____
DEPARTURE DATE

HOTEL SELECTION
Rooms are assigned on a first-come, first-served basis. Every effort will be made to meet your requests, but an alternate hotel will be assigned if necessary.
Rank all hotels in order of preference
(#1 first choice, #2 second choice)

☐ Hyatt Regency Columbus (Sgl/Dbl-$139, Triple/Quad-$149)

☐ The Crowne Plaza Hotel Columbus Downtown (Sgl/Dbl$139, Tripl $159, Quad $169)

Room Type: (must 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

_____

_____

_____

I prefer a: (Check one)

☐ Non-Smoking Room ☐ Smoking Room

Subject to availability.

DEPOSIT INFORMATION

ALL HOTELS REQUIRE A DEPOSIT OF ONE NIGHT ROOM RENTAL WITH EACH RESERVATION REQUEST. HOUSING FORMS RECEIVED WITHOUT A VALID CREDIT CARD DEPOSIT WILL NOT BE PROCESSED AND WILL BE RETURNED.

Please be advised that the credit card must be valid through the dates of the convention or your reservation will not be processed.

☐ AMERICAN EXPRESS
☐ VISA
☐ MASTER CARD
☐ OTHER _____

_____/_____
CARD NO. EXP. DATE

_____
CARDHOLDER

_____
SIGNATURE

SEND CONFIRMATION TO:
FILL THIS PORTION COMPLETELY & CLEARLY.

_____
NAME

_____
COMPANY

_____
ADDRESS

_____
CITY/STATE/ZIP

_____
COUNTRY

_____
EMAIL

_____
PHONE

_____
FAX

If outside the USA, provide country & city codes along with the telephone numbers.

PLEASE SEND THIS FORM TO THE

Greater Columbus Convention and Visitors Bureau, Attention: Housing
90 North High St.
Columbus, OH 43215

PLEASE USE ONE FORM PER ROOM. MAKE COPIES AS NEEDED.