

## PCA Short Course on Soap & Turpentine Recovery and Tall Oil Processing

## **Room Reservation Form**

Atlanta Airpor		Atlanta, GA- USA						March 10 to 12, 2015		
Please complete and return this form by fax directly to the hotel:				Group Code: Pine Chemicals Association, Inc. Secure Fax: 1-404-767-0844					Phone Reservations: 1-404-559-6890	
				Forms may be e-mailed to: joyce.leaphart@hilton.com						
<b>Guest Inf</b>	orma	tion								
Last Name (Surname or Family Name)			ne)	First Name (Given Name)				Spouse/Guest Name:		
Job Title			Work Phone				Work Phone			
Company				Cell Phone				Cell Phone		
Street Address										
City - State - P	ostal Co	de - Coun	itry							
E-Mail Address										
Duration	of Sta	ay								
Check In Da	te:	/	/ 2015		Check Ou	ut Date:	/	/ 2015	Number of Guests :	
Check In/Out T	imes	Check In Time: 4:00 pm on day of arrival Check Out Time 12:00 pm on day of departure								
Reservation Cut-Off Date		Sunday- February 15, 2015								
		Any reservation received after cut-off date will be confirmed based on space availability.								
Deposit / Cancellation Policy		Deposit: A deposit of one night's room/tax is due at the time of reservation confirmation.  Reservations must be secured by a valid credit card issued by AmEx, Discover, Master Card or Visa.  Balance value of stay will be paid upon checkout.  Cancellations must be made by 11:59 pm EST one day prior to the scheduled arrival date.  Cancellations made less than 24 hours from arrival date will forfeit the first night's deposit (room rate and applicable taxes).								
Room Typ	e/Ra	te (Gr	oup Rates are ex	tended	l 3 days bef	fore and a	fter March	10-12, based on	availability)	
		\$ 109.00 Single Occupancy, 2 Double beds								
		\$ 109.00 Single Occupancy, One King bed								
Room Type		\$ 109.00 Double Occupancy, 2 Double beds								
and Daily		\$ 109.00 Double Occupancy, One King bed								
Room Rate		+ 7% Georgia state sales tax and hotel occupancy tax of 7% (per room, per night, to be added to final bill):								
		Rate								
Notes										
			Children 17 and under stay free when sharing a room with parents							
		Upgrades: Please contact the hotel for rates and availability								
		Special Requests:								
Payment I	nform	ation (c	charge to the follow	ing cre	edit card)					
Credit Card Nu	mher									
Name as it appears on Card							Exp Date (mm/yyyy	)	Card Security Code	
Billing Street A	ddress								•	
Billing City, Sta Code, Country		al								
Signature of Cardholder										