



**FINAL
CUT-OFF DATE
January 31, 2010**

Reservation Form

**Prepared for: ACM (Assn for Computing Machinery)
Group Code: FPGA 2010
Friday, February 19, 2010 -Saturday, February 27, 2010**

Guest Name: _____

Street Address: _____

City: _____ **State or Country:** _____ **Zip/Postal Code:** _____

Telephone: Home #: _____ **Cell #:** _____

Email: _____

Arrival Date: _____ / _____ / _____
Month / Day / Year

Departure Date: _____ / _____ / _____
Month / Day / Year

Estimated Arrival Time: _____

Total # of People: _____ **Additional Person @ \$15.00 per night**

GARDENSIDE SGL/DBL @ \$ 119.99 per night X _____ **Night(s)**

OCEANSIDE SGL/DBL @ \$ 169.99 per night X _____ **Night(s)**

Room Type (check one): _____ **Queen** _____ **King** _____ **Double Queen**

ARRIVAL/DEPARTURE TIME: Our check-in time is at 4:00pm on your arrival date. Our check-out time is at 12:00pm on your departure date. Should you arrive early, we will try to accommodate you, upon room availability.

GUARANTEED RESERVATION: Your reservation will not be held for the indicated arrival date, unless it has been guaranteed by a valid credit card number: American Express, MasterCard, Visa, Carte Blanche, Diner's Club & Discover.

CANCELLATIONS: If your travel plans change and you cannot stay with us, please cancel your reservation by calling the hotel directly. Notification is required 48 hours in advance of 4:00pm of the date of your arrival to avoid a penalty charge. If you fail to cancel your guaranteed reservation, one night's lodging, including tax, will be charged to your credit card, which you agree to pay. When canceling a reservation, always received a cancellation number to insure the release of your obligation.

IMPORTANT NOTICE: Room rates are confirmed in U.S. currency. Applicable local taxes are 10.05% plus \$1 per room night MCTID Assessment Tax, which will be charged in addition to the confirmed room rate. All special requests are subject to availability. Rates above are based on single or double occupancy.

I have read and understand all information above.

Please guarantee the above room reservation to my credit card number listed below.

Credit Card# _____ **Expiration:** _____

Print Name: _____

Signature: _____ **Date:** _____

**Please fax this form to (831) 655-7657. Any questions pertaining to your reservation should be directed to the Reservations Department at (800) 242-8627 or Email: information@montereybeachresort.com
BEACH RESORT Monterey - 2600 Sand Dunes Drive - Monterey - California - 93940**