

# OFFICIAL HOUSING REQUEST FORM



GREEN WEST 2008  
MAY 20-22, 2008  
L.A. CONVENTION CENTER  
LOS ANGELES, CALIFORNIA

**RESERVATION DEADLINE: APRIL 25, 2008**

## 1 HOTEL

Arrival Date: \_\_\_\_\_

Departure Date: \_\_\_\_\_

Provide three hotel choices in order of preference from the attached hotel list (see hotel map).

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Hotel Selection Importance:  Rate  Location

Ambassadors reserves the right to assign hotels based on availability. Rates are subject to availability.

## 2 ROOM INFORMATION

Please supply names of all persons to occupy room and type of room. Note, four individuals is the maximum per room. Only one room per form, please make copies if necessary. Room occupants:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Single  Dbl (2ppl/1 bed)  Dbl/Dbl (2 ppl/2beds)  
 Smoking  Non-smoking

Note: Room type & special requests based on availability at check

## 3 DEPOSIT INFORMATION

**DEPOSIT:** Reservations will not be processed without a guarantee of (1) night's room and tax deposit by credit card or check **14%**. Deposit is **NON-REFUNDABLE** if rooms are canceled within **(7) days** prior to arrival.

Guarantee with credit card:

Number: \_\_\_\_\_

Type: \_\_\_\_\_ Exp: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Guarantee with check. Checks are accepted to reserve rooms but must accompany this form. Make checks payable to: Ambassadors

## MUST BE FILLED OUT

Send Confirmation to: (Please print clearly)

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

ATTENDEE

EXHIBITOR

## SPECIAL REQUESTS

I am in need of an ADA accessible room. I may need special assistance from hotel in event of an emergency.

Other, please list: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## FIVE WAYS TO BOOK

**Green West 2008:**

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