

**HOTEL RESERVATION FORM (must use this form)**  
**Sheraton Seattle Hotel & Towers**  
**May 28 - June 2, 2000**

Sheraton Seattle Hotel & Towers is the official venue for the Conference. If making your reservation without this form, you must indicate **ISOPE**. In order to have your room guaranteed, this reservation form with *one night's deposit* must be received **via either fax or mail** only and no later than **April 26, 2000** by:

**Group Reservations (ISOPE-2000)**  
**Sheraton Seattle Hotel**  
**1400 Sixth Avenue**  
**Seattle, WA 98101, USA:**  
**Fax: +1-206-447-5525**

Surname: \_\_\_\_\_ First (Fore)  
& Middle: \_\_\_\_\_  
Circle: Male Female; Title Mr. Ms. Mrs. Prof. Dr.  
Company: \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Country \_\_\_\_\_  
Postal (ZIP) Code \_\_\_\_\_, Fax \_\_\_\_\_

Arrival: May \_\_\_\_\_ Time \_\_\_\_\_; Depart.: \_\_\_\_\_, Time \_\_\_\_\_

Room Choice:	Room Rates**	No. of Rooms ( <i>and Circle One</i> )
<input type="checkbox"/> One person	\$129 <sup>1</sup>	___ 1 bed
<input type="checkbox"/> Two persons	\$129 <sup>1</sup>	___ 1 bed
<input type="checkbox"/> Two persons	\$139 <sup>2</sup>	___ 2 beds**
<input type="checkbox"/> Mini Suite	\$250	

\* Rates are subject to local room tax 15.6% (subject to change). If your 1st choice is consumed, you will be automatically upgraded to next available rate room.

<sup>1,2</sup> Eligible persons can ask for the U.S. Government rates.

\*\* Name of the person to share: \_\_\_\_\_

**Advance Deposit and Methods of Payment.** Please enclose one night's deposit per room. Cancellations received within 72 hours to arrival and no-shows will be assessed 1 night room and tax charges.

I am enclosing an international money order or check of \$ \_\_\_\_\_ in U.S. Dollars drawn on a U.S. bank, payable to Sheraton Seattle Hotel.

I charge \$ \_\_\_\_\_ to my credit card (*circle one*):

Visa MasterCard Discover Carte Blanche  
Diner's Club American Express JCB

Credit Card no. : \_\_\_\_\_

Name on the card: \_\_\_\_\_ Exp. Date : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 2000

**Complete, and Send This Form With One-Night's Deposit**  
**Directly to Sheraton Seattle Hotel as addressed above**  
**Reservation by either fax or air mail only**  
Reservation after **April 26** is subject to room availability.

## Conference

### **Advance Registration and Proceedings Order with Correct Payment**

Mail or Fax to:

***ISOPE Accounting Service (ISOPE-2000)***  
**P.O. Box 189**  
**Cupertino, California 95015-0189**  
**USA**  
**Fax 1-408-980-1787**

**Advance Registration Deadline: April 28**

## Hotel

### **Reservation Form** (inside the back cover)

Mail or fax directly to (but no reservation by phone):

**Group Reservations (ISOPE-2000)**  
**Sheraton Seattle Hotel & Towers**  
**1400 Sixth Avenue**  
**Seattle, WA 98101, USA:**  
**Fax: +1-206-621-8441**

**Hotel Reservation Deadline: April 26**