

**HOTEL RESERVATION FORM (must use this form)**  
**Grand Hyatt San Francisco on Union Square**  
**May 28–June 2, 2006**

Grand Hyatt San Francisco Hotel is the official venue for the Conference. If making your reservation at ISOPE room rate without this form, you must indicate that reservations are for the *ISOPE Conference*. In order to have your room guaranteed, this reservation form with **one (1)** night's deposit must be received **via either fax or mail** only and no later than **April 28, 2006** by:

**Group Reservations (ISOPE-2006)**  
**Grand Hyatt San Francisco**  
**345 Stockton Street**  
**San Francisco, CA 94108, USA: Fax: +1-415-848-6131**

(Family Name) \_\_\_\_\_ First (Fore) \_\_\_\_\_  
Surname: \_\_\_\_\_ & Middle: \_\_\_\_\_  
*Circle:* Male Female; Title Mr. Ms. Mrs. Prof. Dr.  
Company: \_\_\_\_\_  
Address \_\_\_\_\_  
& City \_\_\_\_\_  
Country \_\_\_\_\_ Postal (ZIP) Code \_\_\_\_\_  
Fax No. \_\_\_\_\_  
Arrival: May \_\_\_ Time \_\_\_\_; Depart.: \_\_\_\_\_, Time \_\_\_\_

Room Choice*:	Single/Double	No. of Rooms ( <i>and Circle One</i> )
<input type="checkbox"/> Run of House??	\$144	___ Sgl / Dbl / ___ Twin**
<input type="checkbox"/> Business Plan	\$179	___ Sgl / Dbl / ___ Twin**
<input type="checkbox"/> Regency Club	\$204	___ Sgl / Dbl / ___ Twin**

\* Rates are subject to local room tax of 14% (subject to change). Business Plan and Regency Club reservation requests will be confirmed based on availability.  
\*\* Name of the person to share: \_\_\_\_\_

**Advance Deposit and Methods of Payment.** Please enclose **one (1)** night's deposit plus tax per room. Cancellations received within 72 hours to arrival and no-shows will be assessed **one (1)** night's 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 **Grand Hyatt San Francisco Hotel**.

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

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

Credit Card no. : \_\_\_\_\_ 3- or 4-digit code \_\_\_\_\_

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_, 2006

**Copy, Complete, and Send This Form with One-Night's Deposit**  
**Directly to Grand Hyatt San Francisco as addressed above.**  
**Reservation by either fax or air mail only.**

Reservation after **April 28** is subject to room availability.