



GROUP/AGENCY HOTEL REQUEST

2009 San Antonio Breast Cancer Symposium

December 9 - 13, 2009

San Antonio, Texas

Thank you for requesting a group room block for the 2009 San Antonio Breast Cancer Symposium. The policies and procedures for booking a group block, and room blocks by Travel/Tour Agencies are listed below. Review them carefully. Complete all areas of the application, return to SABCS Hotel Services signed and dated along with the necessary method of guarantee or advance deposits.

Complete and return this contract with method of guarantee. No rooms will be held without the fully executed contract.

Group/Sponsor (agency or third party names are not acceptable):

(Please Print Clearly)

Group Sponsor

Contact Name

Mailing Address

State/Province/Territory

Country

Zip/Postal Code

Daytime Phone

Fax

(Note: Include Country & City Code)

Email Address

Online Room Block Management, with 24 hour access to manage your group inventory online is available for the 2009 Symposium. Online Block Management allows you to process reservations and changes with receipt of instant confirmation via email, generate a Peace of Mind report listing your entire group (can be downloaded in an Excel format), and inventory reports of your group block availability. Usernames & Passwords are lower case sensitive and should be no fewer than 3 characters and no more than 12 characters. Once your login has been established confirmation of your username and password will be emailed to you.

Online Username:

Online Password:

Room block requests are limited to a maximum of 50 rooms per group per hotel with the exception of the Grand Hyatt and the Marriott Rivercenter where requests are limited to a maximum of 100 rooms.

(1) (2) (3)

Preferred Hotel (Please provide three choices)

DAY	Mon	Tue	Wed	Thu	Fri	Fri	Sat	Sun	Mon
DATE	12/08	12/09	12/10	12/11	12/12	12/13	12/14	12/15	12/16
One Bedded Rooms									
Two Bedded Rooms									
Total									

Please indicate the day-by-day inventory being requested. Please note that room type requests are based on availability and are not guaranteed. Allocation will be based on past performance.

DEPOSIT POLICY

1. **Initial Guarantee/Deposit:** A credit card along with an expiration date valid during the time of stay or an advance deposit of \$410 per room (non-refundable after 9/15/09) paid by check or wire transfer must accompany this form. The SABCS Hotel Service will not process any Group/Agency requests without the required credit card or advance room deposit. Please note that failure to meet this requirement will not only delay your room block assignment but could prevent you from obtaining rooms at one of your preferred hotel choices.

2. **Method of Room/Tax Payment:** The method of payment for the room and tax charges in full must be executed by establishing a Master Account for direct billing with the hotel(s) or by utilizing a Credit Card Authorization form with the hotel(s). Confirmation on the method of payment selected must be submitted to the SABCS Hotel Service within seven (7) business days of receiving your block confirmation. The SABCS Hotel Service will then forward to you the hotel(s) contact information and further directives for either establishing a Master Account with the hotel(s) or submitting a Credit Card Authorization form.
 - Approved hotel(s) Master Account information or hotel(s) confirmation of receipt of the Credit Card Authorization form must be received on or before September 15, 2009. Failure to provide this information can result in the room block being released.

REDUCTIONS/ATTRITION POLICY

A) A commitment to utilize 100% of your total room block will be required. However, you may reduce the total room nights blocked by up to 50% on or before August 1, 2009. Another reduction of a maximum of 5% will be allowed by September 15, 2009.

B) If the total room nights actualized falls below 100% of your total room commitment as of September 15, 2009, you will be financially responsible directly with the hotel or hotels in your block for one night room rate plus tax for each room night variance. Any additional room allocations made to your block after September 15, 2009 will apply.

AGENT OF RECORD POLICY

Housing requests from Tour Groups or Travel Agencies must include an Agent of Record Letter on the client's letterhead, signed and dated by the client. Only originals on client letterhead are acceptable; no fax or e-mail. If an Agent of Record does not accompany your Room request, the request will not be processed until the Agent of Record is received.

RE-SALE POLICY

These rooms may not be re-sold to other clients, third parties or sub-contractors. Companies who do so will be permanently barred from participation in SABCS, and all authorized SABCS vendors and hotels will be notified of same. Re-sold rooms are subject to cancellation and no refund will be issued.

MISCELLANEOUS

- Preliminary rooming list must be supplied by **September 15, 2009**.
- Non-refundable deadline for advance cash deposits by check or wire transfer is **September 15, 2009**.
- Requests for additional inventory must be submitted in writing. Assignment of additional inventory is based on availability upon receipt of written request and additional monies. Additional allocations are also subject to past performance. Attrition will be applied to additional allocations.
- Name of group sponsor (client) is required to avoid double booking due to competition of the same group.
- Any duplicated names found between group blocks as of **September 29, 2009** will be reported to group contacts. Duplicated reservation must be resolved within 72 hours of reporting or are subject to cancellation without refund or further notice.
- Names must be applied to group room block via Online Room Block Management. Failure to meet method of payment notification deadlines and rooming list deadlines will result in cancellation of group block.
- Name changes are allowed up to November 9, 2009.
- All applicable refunds will be made within 60 days from the end of the 2009 Symposium.

- Rates may vary based on the number of people in each room (i.e. single or double occupancy). Final payment will reflect applicable room rate based on occupancy plus tax.
- Policies and procedures included in this agreement are specifically for group bookings and are different from polices and procedures for individual reservations.

AGREEMENT:

On behalf of the group, I agree to abide by all terms outlined in this document. I acknowledge that I have read and understand that if the total room nights actualized at each hotel is below 100% of the established room block as of September 29, 2009 (including additional room allocations made after September 29, 2009), I am financially responsible for each night's variance directly with the hotel(s). I agree to have all individual names applied to the room block on or before September 15, 2009.

I will utilize the method of full payment as indicated below:

_____ Application(s) for a Master Account to establish hotel(s) Direct Billing

_____ Hotel Credit Card Authorization Form(s) to use for full payment.

Name of Company/Block

Authorized Representative

Date

Signature

Date

SABCS Hotel Services Signature

Date

2009 SABCS Wire Transfer Information

If you would like to initiate a wire transfer to transmit payment, please email sabcs@ambassadors.com. Please include your group name, contact name and phone number in this email. Once your group confirmation has been verified, wire transfer information will be sent to you via email.

2009 SABCS GROUP/AGENCY HOUSING DEPARTMENT
 SABCS HOTEL SERVICES
 c/o AMBASSADORS
 240 Peachtree Street, Suite 22-S-10
 Atlanta, Georgia 30303
 Phone: 404-584-7458 (Mon – Fri, 9am – 8pm EST)
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