



# Hotel Reservation Form

American Association of Neuropathologists

Thursday - Sunday, June 8 - 11, 2000

Sheraton Atlanta Hotel

Courtland and International Boulevard

Atlanta, GA

**Reservation Deadline: Tuesday, May 8, 2000**

**Please phone 800-833-8624, or Fax 404-523-3301, or mail this form to make your reservation.**

Name of Guest: \_\_\_\_\_

Institution: \_\_\_\_\_

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

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

ZIP/ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

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

Please Check :  Single \$110\*

Double \$120\*

Triple \$130\*

Quad \$140\*

\*Rates do not include 14% State Sales Tax

Group With: American Association of Neuropathologists

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

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

Credit Card#: \_\_\_\_\_ Exp: \_\_\_\_\_

Special Request: \_\_\_\_\_

**Method of Payment:** Sheraton Atlanta Hotel requires a credit card guarantee to hold a reservation. All reservations must be cancelled at least 72 hours prior to arrival in order to avoid any fees. If you do not want to hold your reservation by credit card, an advance deposit equal to a one night stay must be made by certified funds and mailed to the hotel.

Please fax or mail this reservation form to the Sheraton Atlanta Hotel at 404-523-3301. Reservations also may be made by telephone by calling 800-833-8624. To guarantee special group rates, this reservation must be received **NO LATER THAN MAY 8, 2000.**

To mail, please send to:

Sheraton Atlanta Hotel  
165 Courtland Street  
Atlanta, Georgia 30303  
Attn: Reservations