

**LODGING & MEALS RESERVATION  
WESTERN SPECTROSCOPY**

January 25-27, 2012  
#51701J



Asilomar Use Only

One Form per Person/Family

800 Asilomar Avenue, Pacific Grove, CA 93950 Phone: (831) 372-8016 Fax: (831) 642-4262 [www.VisitAsilomar.com](http://www.VisitAsilomar.com)

**WAYS TO RESERVE A ROOM**

**Fax** completed form to:  
831-642-4262 or 831-642-4261

**Mail** the completed form to:  
Asilomar Conference Grounds  
800 Asilomar Avenue  
Pacific Grove, CA 93950

**Telephone:**  
Reservations will not be accepted over the phone, however if you have any questions you can call Pat Kauffman at 831-642-4218 Monday thru Friday (8AM-4PM PST)

**Email** completed form to:  
AsilomarSales@aramark.com

**PERSONAL DETAILS** Please print clearly; Payment must accompany this registration form.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  Mr.  Ms.

Street Address \_\_\_\_\_ Apt/Suite/Unit \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Daytime Phone \_\_\_\_\_ E-mail address\* \_\_\_\_\_

*\*Confirmations will be sent via e-mail if above is completed.*

**HOUSING DETAILS** On-site housing at Asilomar Conference Grounds is offered on a first-come, first-served basis. All costs are per person and inclusive of all standard meals, facility fee, applicable taxes (subject to change) and a one time processing fee of \$20.

Please mark your preference. If your choice is not available you will be assigned based on availability and the appropriate charge will apply.

2-Night Stay Arrival: Wednesday, January 25 <sup>th</sup> (4PM) Departure: Friday, January 27 <sup>th</sup> (11AM) Meals Inclusive: Begins with Dinner on arrival day and ends with Lunch on departure day.											
<b>PARTICIPANTS ONLY</b>	<b>PARTICIPANTS with GUEST(S)</b>										
<b>Historic Room</b> <input type="checkbox"/> Single Occupancy - \$339.76 per adult <input type="checkbox"/> Double Occupancy - \$235.54 per adult <b>Standard Room</b> <input type="checkbox"/> Single Occupancy - \$424.20 per adult <input type="checkbox"/> Double Occupancy - \$266.66 per adult	<table style="width: 100%;"> <tr> <td style="width: 50%;"><b>Historic Room</b></td> <td style="width: 50%;"><b>Standard Room</b></td> </tr> <tr> <td><input type="checkbox"/> Participant - \$339.76</td> <td><input type="checkbox"/> Participant - \$424.20</td> </tr> <tr> <td colspan="2"><b>PLUS</b></td> </tr> <tr> <td><input type="checkbox"/> Adult Guest - \$115.78 per adult</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Youth Guest - \$98.70 per youth (3-12 yrs. old)</td> <td></td> </tr> </table>	<b>Historic Room</b>	<b>Standard Room</b>	<input type="checkbox"/> Participant - \$339.76	<input type="checkbox"/> Participant - \$424.20	<b>PLUS</b>		<input type="checkbox"/> Adult Guest - \$115.78 per adult		<input type="checkbox"/> Youth Guest - \$98.70 per youth (3-12 yrs. old)	
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Please assign me a roommate (roommate will be assigned by your same gender): I am:  Male  Female

OR I would like my roommate(s) to be: \_\_\_\_\_

NAME(S) *Requested Roommate's Registration Form must be received no later than 11/25/11 or another roommate will be assigned.*

Please check here if you are financially responsible for the person named above that you are sharing a room with.

**SPECIAL REQUEST(S):**  Vegetarian  Gluten-Free  Disability Access \_\_\_\_\_

**AMOUNT DUE** The total amount of \* (\$USD) \_\_\_\_\_ is due and **will be charged upon receipt.**

*\*The total amount due above will be charged upon receipt of your form. The amount written by you above may change if your requested dates, room type and/or occupancy type are unavailable. Please note because of these changes the final amount charged to your Credit Card may differ from your total.*

(Credit Card Number (please print clearly))

Visa                       MasterCard                                 
 American Express       Discover Card                      Expiration Date:

Cardholder Name: \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_

**Check Payment:** Payable To: ARAMARK Sports & Entertainment LLC **Wire Transfer:** Please email Vivian Garcia at [garcia-vivian@aramark.com](mailto:garcia-vivian@aramark.com)

**CANCELLATION POLICY:** A full refund, less a service charge of \$50 per person is given for cancellations received in writing (letter, fax or email) by November 25, 2011. Regrettably, no refunds can be made for cancellations received on or after November 26, 2011 but we will accept a substitute participant at no additional charge. (First transfer is free – 2<sup>nd</sup> one and thereafter will have a \$100 fee per transfer.)  
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