

“Leading and Navigating Tsunami Culture Across the Pacific” Symposium

HOTEL RESERVATION INFORMATION

The InterContinental Hotel in Los Angeles Century City is the official symposium hotel. Reservations should be made early to guarantee space for you. The hotel website provides excellent supporting information about the hotel, its location and access to area maps.

InterContinental Hotel
2151 Avenue of the Stars
Los Angeles, California 90067 U.S.A.
www.intercontinental.com/losangeles

The single/double occupancy rate for symposium participants is \$150 per night. Hotel room rates are subject to applicable state and local taxes (currently 14% plus \$.19 TID Tax). This special rate will be available from March 19 to March 23, 2010. The deadline for the guaranteed room rate is March 8, 2010. After this date room requests will be honored on a first-come, first-serve basis. Check-in time is 3:00 PM - Check-out time is 12:00 AM.

To make reservations, call or fax the completed reservation form to:

Phone: +1 (310) 712-6965 Hiromi Koshi, Director of International Sales

Phone: +1 (310) 712-6947 Egres Thana, Reservation Manager

Fax: +1 (310) 277-9438

In all phone communications, please identify yourself as someone associated with the 2010 GOLD Symposium in order to receive the special rates.

Cancellation Policy:

Your credit card is required as a guarantee. Cancellations must be received no later than March 8, 2010.

Acknowledgements

Acknowledgements will be sent after each reservation booking, modification, and/or cancellation. Review acknowledgements carefully for accuracy.

If you do not receive an acknowledgement within 3 days after any transaction, please contact Hiromi Koshi at hiromi.koshi@ihg.com or Egres Thana at egres.thana@ihg.com



Los Angeles, Century City

Reservation Form

Fax completed form by February 19, 2010 to +1 (310) 277-9438

Attention: Hiromi Koshi, Director of International Sales

Registrant Information

Last Name: _____ First Name: _____

Company/Organization: _____

Address: _____

City: _____ State: _____

Zip Code/Postal Code: _____ Country: _____

Telephone: _____ Fax: _____

E-mail: _____

Billing Address (if different from the above)

Last Name: _____ First Name: _____

Company/Organization: _____

Address: _____

City: _____ State: _____

Zip Code/Postal Code: _____ Country: _____

Room Type: Single Double (Sharing Room with) _____

Non-smoking Accessible Room

Other Requests: _____

Arrival Date: _____ **Departure Date:** _____

Guarantee Method

VISA MasterCard American Express Diners JCB

Credit Card Number: _____

Expiration Date: _____ Name of Cardholder: _____

Signature: _____ Date: _____