INTERNATIONAL CHRISTIAN RETAIL SHOW 2010

EXHIBITOR ROOM BLOCK REQUEST FORM FOR LESS THAN TEN (10) ROOMS

Please print and complete each item and send ONE FORM PER ROOM. If additional forms are needed, complete top section then photocopy and complete with individual information. Reservations will be accepted **Thursday, January 14, 2010 at 12:00 NOON at 12:00 NOON (CST).** Absolutely no forms will be accepted before this time. Any requests received prior to 12:00 NOON (CST) will be scheduled after all other forms received on January 14th.

COMPANY: _____

CONTACT PERSON: _____ TITLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTRY: _____

PHONE: _____ FAX: _____ EMAIL: _____

Hotel Choices: in order of preference (see rates and descriptions)

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

I would prefer a room in the same hotel as (company name) _____

HOTEL PREFERENCE BY: ☐ Location ☐ Rate ☐ Both

PLEASE NOTE: Every effort will be made to accommodate your first choice hotels.

WAITLIST: If your requested hotels are not available, Global Reservations will confirm comparable accommodations for you and place your name on a waiting list for your preferred choice hotels.

ROOM REQUIREMENTS:

ROOM REQUEST – ONE FORM PER ROOM		
List Primary Name 1.	Arrival Date	*Departure Date
Sharewith 2.		
Sharewith 3.		
Sharewith 4.		

☐ Single (1 bed, 1 person) ☐ Double (1 bed, 2 persons)
☐ Double/Double (2 beds, 2 persons) ☐ Triple (2 beds, 3 persons)
☐ Quad (2 beds, 4 persons)
☐ Request King Bed (based on hotel availability)

HOTEL FREQUENT TRAVELER INFORMATION
Hotel:
ID#:

SPECIAL REQUESTS ☐ Non-Smoking ☐ Smoking ☐ Check here if you have a disability and require special accommodations – attach details

SUITES/CONCIERGE ROOMS: For information please contact Global Reservations

You must verify your departure date at check in. Hotels may assess an administrative fee for early departures or for shortening stay after individual cancellation policy.

DEPOSIT REQUIREMENTS:

All rooms must have a deposit at the time of booking in the amount of one night's lodging, plus applicable taxes (see hotel chart), per room, per night. The deposit may either be charged to a major credit card or check made payable to GRI within ten (10) days after receipt of hotel assignment. No checks will be accepted two weeks prior to the convention. After this time please use credit card to insure a valid reservation.

PAYMENT METHOD: AFTER FRIDAY, APRIL 30, 2010 DEPOSITS ARE NON REFUNDABLE

☐ I will send a check no later than ten (10) days after receipt of hotel assignment OR

☐ Please charge the deposit to guarantee these rooms with my credit card listed below. ☐ Master Card ☐ Visa ☐ AmEx

Card Number: _____ Exp. Date: _____

Signature: _____ Cardholder's Name (Print) _____ Date: _____

You must verify your departure date at check in. Hotels may assess an administrative fee for early departures or for shortening stay after individual cancellation policy.

BEGINNING THURSDAY, JANUARY 14, 2010 @ 12:00 NOON (CST)

YOU MAY SUBMIT YOUR REQUEST ONLINE, VIA FAX or MAIL **FAX: (972) 259-4103**

RESERVE ONLINE: http://www.grires.com/cbashowsl10.htm and for hotel details.

MAIL: Global Reservations, CBA Housing Bureau, 807 W. Pioneer Drive, Irving, TX 75061-7433

Questions call: (800) 711-7930 or (972) 253-9891 (M-F 8am-6pm CST) **Email**: cbashow@grires.com

Again your request cannot be submitted before 12:00 NOON (CST) Thursday, January 14th.