

SAGES 2022 Housing Form Exhibitor Request Form

Forms are processed first come, first served.

Deadline: February 11, 2022 or when rooms are sold out.

EMAIL COMPLETED FORM TO REGISTRATION@SAGES.ORG

SAGES

Please email completed form to: registration@sages.org

Denver Hotel Contact Information:

Sheraton Denver Downtown 1550 Court Place

Curtis Denver, A Doubletree by Hilton Hotel 1405 Curtis Street

EXHIBITOR ROOM BLOCK INSTRUCTIONS:

For individual reservations and reservations for less than 10 rooms, please use the form below

Companies booking 10 or more rooms on any single night may be required to sign a sub-block contract with the hotel.

- 2. Complete this form. Only fully completed and signed forms will be processed. Email the completed form to registration@sages.org
- **3.** Once your form is received, you will be contacted by the hotel.

ROOM BLOCK RESPONSIBILITY:

COMPANIES RESERVING 10 OR MORE ROOMS MAY BE REQUIRED TO SIGN A SUB-BLOCK CONTRACT WITH THE HOTEL. Upon signing a hotel sub-contract, EXHIBITOR is financially responsible for 100% of the requested room nights including applicable tax per the terms of the contract. Hotel will accept a 10% cancellations and/or release of total room block until February 11. After that date company/exhibitor is financially responsible for all remaining contracted rooms.

	NTACT INFORMAT xhibitor room block correspo			-		-	_	ed.
Con	tact Name							
Con	npany							
Add	ress							
City			State	Zip _		_Country		
Pho	ne			Cell				
E-m	ail address							
She Dou	TEL eraton Downtown abletree (the Curtis) TEL CHOICES IN ORDE	R OF P	REFERE	NCE: R	\$2 \$1	29.00 R 29.00 89.00 not includ		nd local
1 _			_ 2					_
	DAY	Sun	Mon	Tue	Wed	Thu	Fri	Sat
	DATE	3/13	3/14	3/15	3/16	3/17	3/18	3/19
	Sleeping Rooms							
	Suites							
	TOTAL							

ROOM BLOCK PAYMENT METHOD: Check one box only. This payment method will be applied to ALL ROOMS IN THE BLOCK.

[Please use this card as a guarantee only; each attendee will pay with their own card on-site.
[Please charge this card for all nights, all attendees room , tax and incidentals as indicated.
[We have 10 or more rooms, and will coordinate a sub-block contract with the hotel.

Card Number: _____Exp.Date ______

By signing the Policy Acceptance, I acknowledge that I have read, understand, and agree to comply

Credit Card Type: □VISA □MasterCard □ American Express □ Discover Card

Policy Acceptance Signature

with the policies set forth in this agreement by SAGES.

Exhibitor must sign the Policy Acceptance line. This form will not be processed without signature.

Please use the form below, or attach your own excel spreadsheet, for all reservations.

SAGES 2022

March 16-19, 2022

Each name should appear only once, either under "Staff Name" or "Sharing With."

Room Style

Check all

Arrival

E-mail Address:

Date

Departure Date

Sharing With

Staff Name

Hotel Choice

(please circle one)

			that apply		
	Sheraton		One Two		
	Choraton		Dis 11110		
	Curtis/Doubletree				
	Sheraton		One Two		
			Dis		
	Curtis/Doubletree				
	Sheraton		One Two		
			Dis		
	Curtis/Doubletree				
	Sheraton		One Two		
			Dis		
	Curtis/Doubletree				
	Sheraton		One Two		
			Dis		
	Curtis/Doubletree				
	ard as a guarantee only, each is card for all nights, all attended GUARANTEED RO	ndees (room & tax on	ly)		
redit Card Type:	$\Box ext{VISA}$	□MasterCard	□ Ame	erican Express	
• •				-	
ompany Name:					
ddress:			City: _		
tate or Country:				Zip: _	
roup Contact					
ame:					

Please use this form to submit reservations to regisration@sages.org by February 11, 2022

Fax:____