ON-CAMPUS HOUSING RESERVATION FORM DEVICE RESEARCH CONFERENCE (DRC)

University of Notre Dame, Notre Dame, IN BY MAIL: DRC June 25–27, 2001 Center For Continuing Education PO Box 1008 Notre Dame, IN 46556 USA Please print or type: BY FAX: Credit Card payment only (219) 631-8083 Name: Mr. Mrs. Last Name Middle Initial First Name Departure Date: Arrival Date: Company/School/Organization: Address: Zip/Postal Code City State/Province Country Telephone: _____ Country Area/City Country Area/City Local Number Local Number E-Mail Address: Special Needs: Name of person sharing room: Arrival Date: Departure Date: The residence hall accommodations reserved at the University are single and double occupancy. Rooms will be assigned on a first-request basis so early reservation is recommended. I PLAN TO ATTEND DRC AND WISH TO MAKE THE **EARLY ARRIVAL** (Saturday, June 23): **FOLLOWING ARRANGEMENTS:** Lodging only—meals not included on Saturday. □ Single\$29.00 (Refer to "On-Campus Housing" in this brochure for details.) □ Double \$23.00 **LATE DEPARTURE** (Friday night, June 29): PLAN A: Lodging on Monday through Tuesday and 6 Lodging Friday evening. meals. ☐ Single \$29.00 □ Plan A: Single \$117.70 □ Double.....\$23.00 **COMMUTER LUNCH PACKAGE:** PLAN B: Lodging on Sunday through Tuesday and 8 I plan to make off-campus housing arrangements and meals. wish to purchase a Commuter Lunch Package for on-campus meals. ☐ 3 DRC Lunches (\$31.50/person) □ 5 DRC/EMC Lunches (\$52.50/person) \$ I PLAN TO ATTEND BOTH DRC AND EMC. I UNDER-STAND THAT I MUST REGISTER FOR THE ELEC-**PAYMENT OPTIONS:** ☐ Make checks payable to Notre Dame CCE. TRONIC MATERIALS CONFERENCE SEPARATELY ON THE EMC REGISTRATION FORM, BUT WISH TO MAKE Payment should be made in US dollars drawn MY HOUSING AND MEALS ARRANGEMENTS ON on a US bank. THIS FORM (submit one Housing Reservation form only) □ VISA □ MasterCard Card No.: _____ Exp. Date: _____ PLAN C: Lodging Sunday through Thursday and 13 Cardholder's Name: meals. Signature: _____ ☐ Plan C: Double......\$244.50 Housing Plan Fees\$

PLEASE RETURN THIS FORM BY MAY 18, 2001 TO:

Commuter Lunch package ... \$

TOTAL FEES PAID\$_____