



Merton C. Flemings Symposium

JUNE 28-30, 2000

MASSACHUSETTS INSTITUTE OF TECHNOLOGY • CAMBRIDGE, MASSACHUSETTS, U.S.A.

HOTEL REGISTRATION FORM

Reservation Deadline: May 27, 2000

Reservations and group rate after May 27, 2000 will be on a space and rate available basis.

Royal Sonesta Hotel Boston/Cambridge

CHECK YOUR SELECTIONS AND FILL IN THE NECESSARY INFORMATION • PLEASE PRINT OR TYPE

PLEASE CHECK TYPE OF ROOM REC Single	\$180 Bed\$180)	Departure Date:	
□ Double/Double 2 Persons – 2 E	3eds\$180	Please reserve	room(s) for person(s).	
Name:				
Company:				
Home Address:				
City:	State/Province:	Zip/Postal Code:	Country	
elephone: Fax:		E-Mo	E-Mail:	
RESERVATION GUARANTEED BY: Advance Deposit Enclosed (check Charge Account: American Exp Diners Club Discover	•	Card #:		
DO YOU WANT A CONFIRMATION MAILED TO YOU? Yes No MAIL OR FAX THIS FORM BEFORE MAY 27, 2000 TO: Reservations Royal Sonesta Hotel Five Cambridge Parkway Cambridge, MA 02142 Fax: 617-661-5956		your reservation arrival without you do not can on the day of a deposit, or the charged to you To guarantee y	The Royal Sonesta Hotel regrets that it cannot hold your reservation after 6:00 p.m. on the day of arrival without guaranteeing the reservation. If you do not cancel your reservation by 6:00 p.m. on the day of arrival you will either forfeit your deposit, or the first night's room and tax will be charged to your credit card. To guarantee your reservation for late arrival	
For revisions or cancellations, please telephone (617) 806-4300. Check-in time 3:00 p.m. Check-out time 12:00 noon.		Enclose a check first night's rook Sonesta Hotel Send us complete (American Exp	(after 6:00 p.m.), we request that you either: Enclose a check or Money Order covering the first night's room and tax payable to the Royal Sonesta Hotel OR Send us complete credit card information (American Express, Diners Club, VISA, MasterCard, or Discover) including entire	





number, expiration date, and signature.