



**August 19-22, 2007
Ann Arbor, Michigan**

TMS Housing Form

Fourth International Conference on Very High Cycle Fatigue

Reservation Deadline: July 18, 2007

Complete this form and send with payment to appropriate hotel.

Hotel Selection:

- | | | | |
|---|------------------------|---|-------------------------|
| <input type="checkbox"/> The Dahlman Campus Inn | Mail or fax to | <input type="checkbox"/> Bell Tower Hotel | Mail or fax to |
| <input type="checkbox"/> Single: \$146 <input type="checkbox"/> Double: \$170 | The Dahlman Campus Inn | <input type="checkbox"/> Single: \$146 <input type="checkbox"/> Double: \$170 | Bell Tower Hotel |
| Room Tax: 8% | 615 East Huron Street | Room Tax: 8% | 300 South Thayer Street |
| Reservation Code: 6803 | Ann Arbor, MI 48104 | Reservation Code: 2815 | Ann Arbor, MI 48104 |
| Check-in: 4 p.m. Check-out: 11 a.m. | Fax: (734) 769-6222 | Check-in: 4 p.m. Check-out: noon | Fax: (734) 769-4339 |

Arrival Date _____ **Departure Date** _____

Special Requests (*subject to availability*) _____

Print or type:

Last Name _____ First Name _____

Employer _____

Street/P.O. Box _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Telephone _____ Fax _____

Payment Method:

Check

Credit Card: Visa MasterCard Discover

Card Number _____ Expiration Date _____

Cardholder Name (please print) _____

Cardholder Signature _____

Reservations must be guaranteed by personal check or credit card for the cost of room and tax for one night. Cancellations must be made at least 24 hours prior to arrival to avoid billing for one night.

Requests for reservation dates prior to and after the conference will be accepted on a space-available basis only.