

HOUSING REQUEST FORM

RDH * Under One Roof
Walt Disney World Dolphin Resort
Orlando, Florida
August 5 - 7, 2010



To make your hotel reservation, contact **Preferred Convention Services**, the official **RDH Under One Roof 2010** housing company. Discounted rates are available only through our office and cannot be guaranteed after **July 6, 2010**.

HOTEL INFORMATION

Walt Disney World Dolphin Resort
\$174 Single/Double; \$199 Triple; \$224 Quad
Room Tax: 12.5%

Conference Location: On property

Airport: Orlando International Airport (MCO): 22 miles

- Taxi approximately \$65.00 each way
- Shuttle approximately \$20 per person one way, \$33 Round-trip

Hotel Services:

- Picabu's 24 Hour Buffet, Shula's Steak House, Todd English's Bluezoo (seafood)
- Room Service
- Mandara Spa & Health Club, 5 Pools, Jacuzzis
- Tennis/Basketball and Sand Volleyball Courts
- Business Center

Parking: \$9 Self overnight; \$16 Valet overnight (subject to change)

Resort Services Package: \$10 per room, per night includes local & 800 calls up to 60 minutes, domestic long distance calls up to 20 minutes, 1 bottle of water daily, high speed internet access and admission to the fitness center.

GUEST INFORMATION

SELECT ONE:

Exhibitor Attendee Other _____

Only 1 room per form. If multiple rooms are required, please make copies of this form. Room type and special requests are based on availability at the time of check-in.

ROOM TYPE DESCRIPTIONS

S = Single (1 person/1bed) **D** = Double (2 people/1 bed)
D/D = Double/Double (2 people/2 beds) **H** = Hospitality Suite

Room Type _____

Arrival Date _____ Departure Date _____

Guest Name _____

Sharing With _____

Special Requests:

Non-Smoking Low Floor Early Arrival

Smoking High Floor Late Departure

Other _____

CONTACT INFORMATION

Name _____

Company _____

Address _____

City _____

State _____ Zip _____

Phone _____ Fax _____

Email _____

GUARANTEE INFORMATION

Reservations will be guaranteed with the credit card information provided. No advance deposits will be taken.

Credit Card Type: AMEX Visa MasterCard Discover

Credit Card #: _____ Exp: _____

Cardholder: _____

Signature: _____

Early Departure Fee: One night's room and tax.

Cancellation Information: The credit card provided will be charged 1 nights room and tax if the reservation is cancelled 7 days or less from the arrival date. In addition, a \$40 processing fee will be assessed by PCS for all reservations cancelled 45 days or less from arrival.

5 WAYS TO RESERVE

Phone: 888.472.7462 or 310.235.2647
Fax: 310.235.2648
Email: reservations@preferred1.com
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Mail: RDH Under One Roof
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