

Holiday Inn Toronto Midtown 280 Bloor Street West Toronto, Ontario M5S 1V8

Phone: 416-968-0010 Fax: 416-968-7765 WWW.holiday-inn.com/torontomidtown

IN-HOUSE RESERVATION REQUEST FORM

Event: SciCAD	E 2011 Confere	iice	
Booking Code:	SCI		
Date: Su	nday, July 10, 20	011 to Friday, July 15, 2011	
	Plus One	ollars: \$129.99-single/doub s applicable taxes, per room, e Queen bed or two Double b d 2days following the confer	per night, currently 13% peds
To avoid disappo Friday, June 1	0, 2011.	remit this form by mail, fax	
E-mail: cn312r	es@whg.com	Phone: 416-968-0010	Fax: 416-968-7765
Booking Inform	ation:		
Name:			-
Mailing Address	3:		
Telephone:		Fax:	
Arrival Date:		Departure Date:	
Number of peop	le:Room T	Type Non-smk: □ 1 Quee	en bed 🗆 2 Double beds
Credit Card Ty	pe: Visa Am	ex Master Card Diners	Sears Discovery
Credit Card Nu	mber:	Ex	p Date:
Name on Card: A guaranteed reserv fails to arrive, the g	vation will be held u uarantor will be cho	Printed: ntil 7am the next morning of the arged one nights accommodation notice to avoid this charge to avo	reservation date. If the guest as a "NO SHOW". Individual