

Instructional Technology and Education of the Deaf

June 25-27, 2001 ~ Symposium

June 28-29, 2001 ~ Workshops

National Technical Institute for the Deaf

<http://www.rit.edu/~techsym>

Radisson Hotel Rochester Airport Reservation Information

Please copy and mail or fax this completed form to:

Radisson Hotel Rochester Airport, 175 Jefferson Road, Rochester, NY 14623
(716) 475-1910 (716) 475-9366 (Fax)
Radisson Central Reservations: 1-800-333-3333

Cut-off date for reservations is **May 21, 2001**. After that time, reservations accepted on a first-come, first-served basis.

Name (Last, First, MI): _____

Address: _____

City/State: _____ Zip/Postal Code: _____ Country: _____

Phone number: _____ Fax: _____

Arrival date: _____ Departure date: _____

No reservations can be made without arrival and departure dates!

Number of nights: _____

Check-In Time: 3 p.m.

Check-Out Time: Noon

Rates: (Please check one. Print the names of ALL persons occupying each room and select the type of room desired.
Tax for guest rooms is 14%)

Smoking room _____ Non-Smoking Room _____

Single occupancy \$ 99.00 _____

Double occupancy \$109.00 (King) _____ (2 Double Beds) _____

RESERVATION GUARANTEE (to hold guest room past 6 PM on arrival day)

Payment method:

Check

Visa

Master Card

Discover

American Express

Diners Club

Card number: _____ Expiration date: _____

Authorized Signature: _____

By signing the above I authorize the charging of my credit card for one night's deposit plus tax to be credited to my reservation.

Reservations must be canceled 24 hours before your arrival or the account will be billed for one night's stay.

Checks or money order payable to Rochester Radisson Airport for one night's room charge plus tax.

ACCESSIBILITY REQUESTS: Please indicate when making your reservations if you will need an accessible room. Deaf access materials will be available on a first-come, first-served basis at the time of check in. Please indicate any accessibility requests here: