

**Hotel Reservation Form**  
**ASP-DAC 2009**  
**January 19 - 22, 2009, Yokohama Japan**

Please complete and return this form to:

JTB Tokyo Metropolitan Corp.  
JTB Yokohama Convention Center  
Address: Dai-6-Yasuda Bldg. 6F, 3-29-1 Tsuruya-cho, Kanagawa-ku,  
Yokohama 221-0835, Japan  
Phone: +81-45-316-4602 Fax: +81-45-316-5701  
e-mail: jtb\_convention@jtb.jp

**Deadline: Dec. 15, 2008, Japan time**

**Note: You should send this form by postal mail or fax when you apply.**

(Please type or write in block letters. )

Full Name: ( ) Prof. ( ) Dr. ( ) Mr. ( ) Ms.

Family Name: \_\_\_\_\_, First Name: \_\_\_\_\_, Middle Initial: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Mail Stop: \_\_\_\_\_

Dept./Div.: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Please remember to include your country and/or city code for Phone/Fax numbers.

Name of Accompanying Person(s), Family Member(s) if any:

( ) Mr. ( ) Ms.

Family Name: \_\_\_\_\_, First Name: \_\_\_\_\_, Middle Initial: \_\_\_\_\_

Arrival Schedule:

Arriving at \_\_\_\_\_ (airport) on \_\_\_\_\_ (date)

by \_\_\_\_\_ (flight number)

**Hotel Accommodations:**

Please select 2 hotels in order of preference and enter the name of the hotel and the hotel number (see hotel list in the advance program).

1st choice: \_\_\_\_\_ (No. )

2nd choice: \_\_\_\_\_ (No. )

Room Choice: ( ) Single ( ) Twin

Breakfast: ( ) Yes ( ) No

Period of Stay: Check-in \_\_\_\_\_ Check-out \_\_\_\_\_ for \_\_\_\_\_ nights

**Guarantee of Booking:**

Credit Card: ( ) AMEX ( ) VISA ( ) Master Card

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Card Holder's Name : \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ (month/year)

Authorized Signature: \_\_\_\_\_