

The Moscone Center – West Hall

INSTRUCTIONS

ONLINE: Visit <https://resweb.passkey.com/go/mw11>

PHONE: Macworld Housing Bureau
Monday - Friday, 8am-5pm PST at
(805) 290-1341

FAX your completed form to
(508) 620-6668.

ACKNOWLEDGEMENTS

The Housing Bureau will send you a confirmation of your reservation. Please review all information for accuracy. Confirmations will be sent within 24 hours of reservation being processed. If you do not receive your confirmation please contact us at (805) 290-1341.

ROOM RATES/TAXES

Take advantage of the lowest negotiated Macworld rates; reserve your room by January 3, 2011. After that date, Macworld room blocks will be released and hotels may charge higher rates.

Taxes: Hotel rates are subject to applicable state and local taxes (currently 14.065% per room, per night) and a 1.5% Tourism District Assessment and are subject to change. Taxes are not included in the room rate

SPECIAL REQUESTS

Special requests cannot be guaranteed, however hotels will do their best to honor all requests. Hotels will assign specific room types upon check-in, based on availability.

CHANGES, CANCELLATIONS,

REFUNDS

Reservations may be changed, based upon availability, or canceled up to 72 hours prior to scheduled arrival date without penalty. Cancellations received less than 72 hours prior to scheduled arrival date will be charged one-night's room and tax.

Continue to use the Macworld Housing Bureau for all changes and cancellations until January 14, 2011. **Please do not contact the hotels directly until after January 3, 2011.**

SUITE REQUESTS

To request a suite, please submit to fax number (508) 620-6668, Attn: Housing Manager. Suites are available to exhibiting companies only.

DEPOSITS

A credit card number is required to process each reservation request. Your credit card will be used to guarantee your reservation only. Checks will **not** be accepted.

HOTEL INFORMATION

Arrival Date _____ Departure Date _____
 First Name _____ M.I. _____ Last Name _____
 Email Address _____ (required for confirmation)
 Daytime Phone _____ Fax _____
 If providing international numbers, please include country and city access numbers
 Company _____
 Address _____
 Address 2 _____
 City/State/Province _____
 Zip/Postal Code, Country _____

HOTEL SELECTION – Please list three choices in order of preference. If requested hotels are unavailable, a reservation agent will contact you for your next selection

Hotels	Room Rate Single/Double	Distance to Moscone
InterContinental San Francisco Headquarters Hotel	\$215	Adjacent to West Hall
Galleria Park Hotel – non smoking	\$169/Single \$179/Double	4 blocks
Grand Hyatt San Francisco	\$196	6 blocks
Handlery Union Square Hotel – non smoking0	\$165- Historic \$195 -Premier	4 blocks
Hilton San Francisco Union Square	\$210 Standard, \$234 -Tower	4 blocks
Hotel Milano	\$159	2 blocks
Hotel Nikko San Francisco	\$229	4 blocks
Hotel Palomar	\$199	1.5 blocks
Marriott Union Square – non smoking	Sold Out	7 blocks
Mosser Hotel	\$109	1 block
Pickwick Hotel – non smoking	\$149	2 blocks
The Powell Hotel	\$149	3 blocks
Prescott Hotel – non smoking	\$139	5 blocks
SF Courtyard Marriott – non smoking	\$209	2.5 blocks
San Francisco Marriott Marquis – (non smoking)	Sold Out	1 block
Serrano Hotel	\$119	5 blocks
Sir Francis Drake	\$129	5 blocks
W San Francisco	\$225	Across the street
Westin Market Street	\$229	1 block
Westin St. Francis – non smoking	\$179	5 blocks

#1 Choice _____ #2 Choice _____ #3 Choice _____

List all room occupants: 1. _____ 2. _____

3. _____ 4. _____

King Bed Double/Double Non Smoking

Hotel Rewards Account Number _____

Additional Request _____

DEPOSIT INFORMATION – a credit card is required to process each reservation.

American Express MasterCard Visa Discover Diner's Club

Card Number _____ Exp. Date _____

Name on Credit Card _____

Cardholders Signature _____