

2005 IEEE International Electron Devices Meeting

HOTEL REGISTRATION FORM

December 5-7, Hilton Washington, Washington, DC

Please type or print

Last Name (Family Name).....First Initial.....

Address Mail Stop:

State/Country Zip Code

Telephone No. ()

Fax No. ().....

Email:

Date of Arrivalat am/pm

Date of Departure at am/pm

Please reserve accommodations as indicated:

_____ Single @ \$186 _____ Double @ \$208
Check off room type desired. All rooms are subject to a 14.05% city tax.

RESERVATION DEADLINE: NOVEMBER 10, 2005 after which time RATES & AVAILABILITY CANNOT BE GUARANTEED. Rooms must be guaranteed by a credit card or an advance deposit. The hotel will send a confirmation.

MAIL this form and deposit to:
Reservations
Hilton Washington
1919 Connecticut Ave., NW
Washington, DC 20009 USA
Phone: 202-483-3000
Fax: 202-232-0438

GUARANTEED RESERVATIONS: Indicate one of the following:

A. Credit Card
Card Number Exp. Date
Signature

B. First Night Deposit Enclosed \$ _____

Make check payable to: Hilton Washington (US dollars only)

Mail or fax this form to the Hilton Washington to reserve a room under the IEDM room block.