



# Hotel Reservation Form

12th Annual Comprehensive Review & Update of Perioperative Echo  
February 9 - 14, 2009 • Sheraton San Diego Hotel & Marina

**CUT-OFF DATE: January 8, 2009**

**Please Reserve:**

\_\_\_\_\_ Rooms My Arrival Date is: \_\_\_\_\_ Arrival Time: \_\_\_\_\_ My Departure Date is: \_\_\_\_\_

Check in time is 3:00 pm, but we try to accommodate early arrivals, check out time is 12 noon. For suites, please contact hotel directly.

Name \_\_\_\_\_  
Last First MI

Preferred Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email Address \_\_\_\_\_

Office Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Fax # \_\_\_\_\_

Accompanying Person(s) Name(s) \_\_\_\_\_ #Adults \_\_\_\_\_ #Children \_\_\_\_\_

Extra Adults in a room are \$20 per night. There is no additional charge for children under the age of eighteen.

**Please check your preference:**

Standard Room	<input type="checkbox"/> \$245 Single	<input type="checkbox"/> \$265 Double
Premium Room	<input type="checkbox"/> \$255 Single	<input type="checkbox"/> \$275 Double (Guaranteed views)
Club Room	<input type="checkbox"/> \$275 Single	<input type="checkbox"/> \$295 Double
Suites	<input type="checkbox"/> \$500 Lanai Suites	<input type="checkbox"/> \$750 Executive Suites

Club rooms include continental breakfast for two, hors d'oeuvres in the evening, high-speed internet access and local and toll-free phone calls. All rooms subject to availability. If your requested room and bedding type is not available, an alternate will be assigned.

Based on Availability:

Non-Smoking     Smoking     King     2 Double Beds     Request Crib

Special requests: \_\_\_\_\_ Starwood Preferred Guest #: \_\_\_\_\_

All reservations must be accompanied by a deposit for the first night room and 12.565% tax. There is no penalty for cancellations 7 days prior to the date of arrival. The deposit will be non refundable if the reservation is not cancelled 7 days prior to arrival.

**Reservations include complimentary use of the health club and a high-speed internet connection.**

Check/money order enclosed in the amount of \$ \_\_\_\_\_ (Please make payable to Sheraton San Diego Hotel & Marina)

Please charge my first night's deposit to:     VISA     Mastercard     Discover     American Express  
 Enroute     JBC     Diner's Club

Card #: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name on Card: \_\_\_\_\_

**Send reservations to the Sheraton San Diego Hotel & Marina**

Reservations Department  
1380 Harbor Island Drive  
San Diego, CA 92101-1092

Reservations: Phone (877)-734-2726 • Fax: (619) 692-2312  
Guest: Phone (619) 291-2900 • Fax (619) 692-2337