




Guest Information:

Name:	Institution/Organization:
Address:	City/State/Zip:
Daytime Phone:	Fax:
E-Mail:	

Room Reservation Information:

Arrival Date (3:00 p.m. Check-In):
Departure Date (12:00 p.m. Check-Out):
Adults:
Children:
<input type="checkbox"/> Non-Smoking <input type="checkbox"/> Smoking
<input type="checkbox"/> One Bed <input type="checkbox"/> Two Beds Request Only
<input type="checkbox"/> Room For One Person (200. ⁰⁰ Euro) <input type="checkbox"/> Room For Two Persons (200. ⁰⁰ Euro) <i>Room rates do include VAT tax at date of Service.</i>
<input type="checkbox"/>  Please contact me regarding special needs.
Specials Requests (Upon Availability):

**PLEASE MAKE YOUR RESERVATIONS EARLY.
The block of rooms reserved at the special ISMICS rate may fill before the deadline.**

The Reservations Office must receive all reservations by Tuesday, June 1, 2010.






The discounted group room rates quoted are offered on a space available basis until Tuesday, June 1, 2010. Reservations requested after this date will be subject to the hotel's prevailing rates. Room rates do include VAT tax at date of Service.

A deposit must accompany all reservations, equal to the first and last night's stay. Should you wish to use a credit card for deposit, please complete the payment information below.

Attention: Group Housing ISMICS
InterContinental
Ein Betrieb der Neue Dorint GmbH
Budapester Straße 2 10787 Berlin, Germany
Reservations: 0049-30-2602-1287

CANCELLATION: You must cancel no less than 7 days prior to your arrival date or the full deposit is forfeit. Partial cancellation made less than 7 days in advance (length of stay shortened) forfeits the last night of deposit. Incomplete forms will not be accepted.

Payment Information:

<input type="checkbox"/> 	<input type="checkbox"/> 	<input type="checkbox"/> 		
Name (As it appears on Card) _____				
Security Code: _____ (See card images Above) Where is your Card Security Code? Your credit card's security code is a 3- or 4- digit number located on the front or back of your credit card.				
CREDIT CARD NUMBER: _____			EXPIRATION DATE: ____ / ____	
BILLING ADDRESS _____ (If not the same as address listed above)				
SIGNATURE: _____ I authorize to charge my credit card the above fees.				

Please fax completed form to InterContinental +49 (0)30 2615 057