



Hotel Registration Form

2010 APWA International Public Works Congress & Exposition
 August 15–18, 2010 | Boston Convention and Exhibition Center | Boston, MA

All hotel requests are processed on an availability basis.

APWA CONGRESS HOTELS

Stay at one of the official Congress hotels and save on lodging. APWA has negotiated great rates for all attendees at the hotels listed below. Complimentary shuttle service will operate from the official Congress hotels located in Boston's historic Back Bay. Use the map for hotel locations.

- The Westin Boston Waterfront:** \$189 Single/Double (Co-Headquarters) 425 Summer Street
- Seaport Hotel:** \$189 Single/Double One Seaport Lane
- Sheraton Boston:** \$175 Single/Double (Co-Headquarters) 39 Dalton Street
- The Boston Park Plaza Hotel & Towers:** \$169 Single/Double 50 Park Plaza at Arlington Street
- The Colonnade Hotel:** \$179 Single/Double 120 Huntington Avenue

All rates are per room and are subject to 14.45% occupancy tax, (subject to change).

INTERNET RESERVATIONS

Visit the following web site: www.apwa.net/congress.

FAXED RESERVATIONS

Faxed reservations should be faxed to APWA Housing Bureau at: 1-312-329-9513

MAILED RESERVATIONS

To make your reservations by mail, send to: APWA Housing Bureau, 110 W Hubbard Street, Chicago, IL 60654

TELEPHONE RESERVATIONS

Monday – Friday from 8 a.m. – 5 p.m. CST.
 Domestic Phone number: 1-800-793-4753
 International Phone number: 1-312-527-7300

CONFIRMATIONS

APWA Housing Bureau will send you a confirmation of your reservation. Please review all information for accuracy. If you have changes or do not receive your confirmation, please contact the APWA Housing Bureau at 1-800-793-4753 or 1-312-527-7300 for International callers or by e-mail at awpa@onpeakevents.com.

MAKING RESERVATIONS

To take advantage of the special APWA rates, please make your reservation by Tuesday, July 20, 2010 through the APWA Housing Bureau. Beginning Thursday, July 22, 2010 all reservations must be made directly with the hotel and special APWA rates are on an availability basis only and hotels going rate may apply. Special requests can not be guaranteed; however, hotels will do their best to honor all requests. Hotels will assign specific room types upon check-in, based on availability.

SUITES

Suites must be requested in writing via e-mail at awpa@onpeakevents.com or by fax 1-312-329-9972. All suites are subject to APWA approval.

CANCELLATIONS

Cancellations made within 48 hours of arrival will result in a cancellation fee equal to one night's room and tax.

CHANGES

Contact the APWA Housing Bureau for all changes until Tuesday, July 20, 2010. Beginning Thursday, July 22, 2010 all changes must be made directly with the hotel.

1. GENERAL INFORMATION

First Name _____ Last Name _____
 Title _____ Company _____
 Address _____
 City _____ State/Province _____ Zip/Postal Code _____ Country _____
 Phone _____ Fax _____
 E-mail Address _____
 Emergency Contact _____
 Emergency Contact Phone Number _____ Emergency Contact E-mail Address _____

2. HOTEL SELECTION

Select three hotels to facilitate processing of your request. See map and hotel information for location and rates.

First _____ Second _____ Third _____

If all requested hotels are unavailable, a reservation will be made at the next available hotel.

Please indicate criteria for choices:

- Comparable Room Rate Proximity to Convention Center

ARRIVAL DATE: _____ TIME: _____ a.m./p.m.

DEPARTURE DATE: _____

Note: All Boston hotels are non-smoking.

ADDITIONAL OCCUPANTS Additional Occupant's Name(s) if sharing a room:

- Single – 1 person Double – 2 people Triple – 3 people Quad – 4 people
 one bed two beds

3. SPECIAL REQUESTS

Special reservation requests can not be guaranteed, however, hotels will do their best to honor all special requests.

Do you have any physical challenges of which the hotel should be aware? List special or other needs:

4. DEPOSIT INFORMATION

Rooms will not be held without a valid credit card number or check.

Visa MC Credit Card Number _____ Expiration Date _____

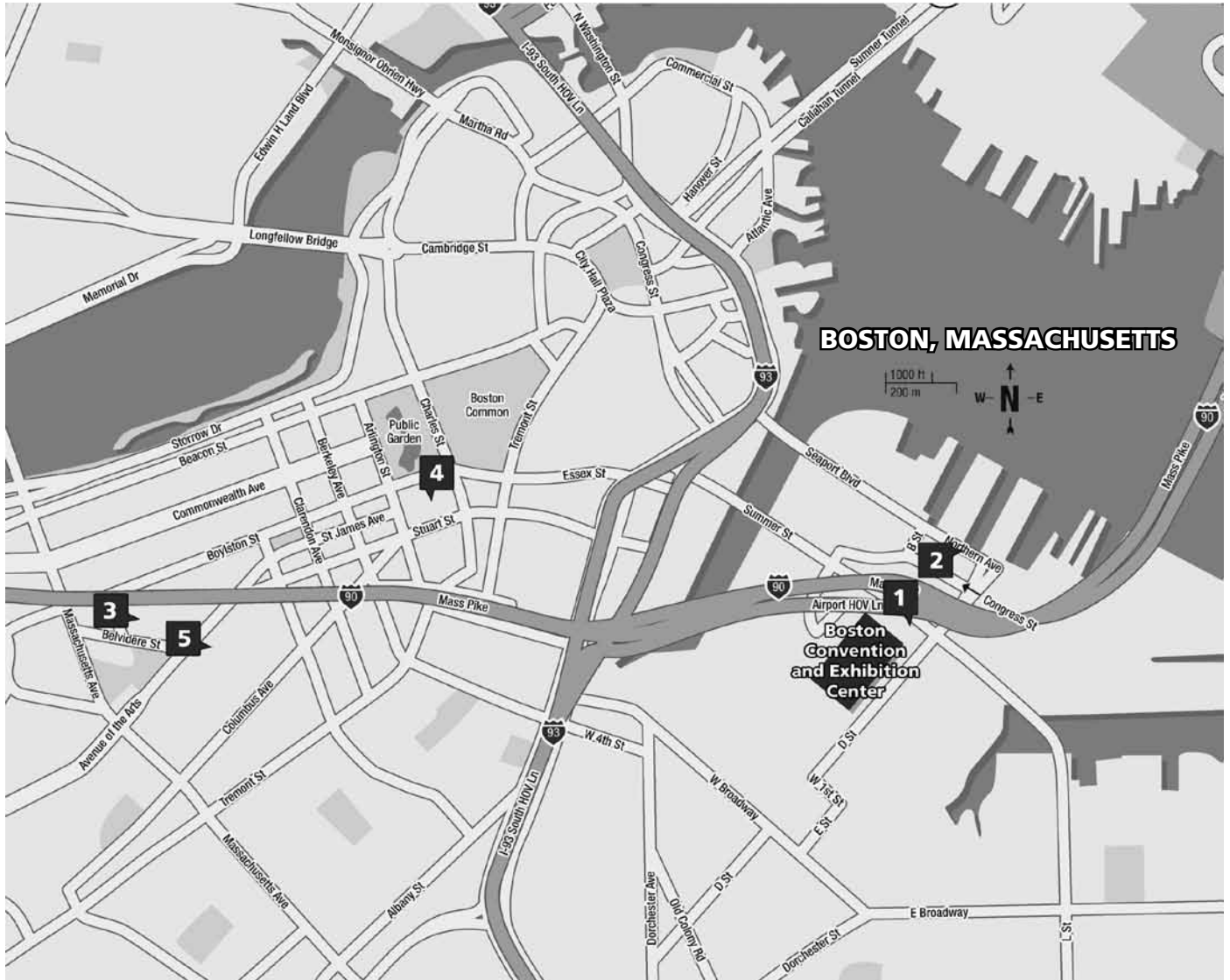
AmEx Disc _____
 Name of Card Holder

 Authorized Signature

Check attached Check Number: _____

Boston Map

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BOSTON HOTELS

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|--|---|--|
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|--|---|--|