



Housing Reservation Form

Please use this form to reserve one room by
fax or regular mail.

Return this for to: GALA Choruses Housing Bureau, 701 Brickell Ave, Suite 2700, Miami, FL 33131 or fax to: 305-539-3106.

Housing opens on January 29, 2008 at noon Eastern. Deadline for housing reservations is June 15th, 2008 at mid-night Eastern.
Please direct questions to: housing@gmcvb.com
Phone: 800-476-9969

STEP 1 - CONTACT INFORMATION

Name: _____
 Chorus: _____
 Address: _____
 City: _____
 State/Province: _____
 Postal Code/Zip: _____
 Country: _____
 Day Phone: _____
 Evening Phone: _____
 Fax: _____
 E-mail: _____

STEP 2 - REVIEW HOTEL RATES (price per room, per night)

(ALL PRICES IN US\$ - ADD 13% TAX)	1 person	2 people	3 people	4 people
Hyatt Regency Miami	\$119	\$119	\$139	\$139
Intercontinental Miami	\$119	\$119	\$119	\$119
Holiday Inn Port of Miami	\$112	\$112	\$112	\$112
DoubleTree Grand	\$119	\$119	\$119	\$119
Marriott Biscayne Bay	\$129	\$129	\$129	\$129
Hilton Downtown Miami	\$119	\$119	\$119	\$119

STEP 3 - ACCOMMODATION SELECTION

Indicate hotel desired in order of preference. 1st choice is not guaranteed.

1. _____
 2. _____
 3. _____
 4. _____
 5. _____

STEP 4 - ROOM TYPE SELECTION

Please select 1:
 Hotel - Single (one bed, one person)
 Hotel - Double (one bed, two people)
 Hotel - Double (two beds, two people) - limited availability, please check here if one bed is acceptable in place of two double beds: ____
 Hotel - Triple (two beds, three people)
 Hotel - Quad (two beds, four people)

Name of additional person(s) sharing this room:
 1. _____
 2. _____
 3. _____

STEP 5 - SPECIAL REQUESTS

Please list any needs/requests (e.g. handicap access, smoking):

STEP 6 - ARRIVAL & DEPARTURE DATES

ARRIVAL DATE: _____ DEPARTURE DATE: _____

STEP 7 - ROOM RESERVATION DEPOSIT

Authorized Signature: _____
 Printed Name: _____
 Date: _____

To guarantee your reservation, you must submit a deposit equal to one night room and tax. Hotel tax is currently 13%. Only reservation deposits at the Intercontinental will be charged immediately. All other will be processed at check-in.

If using a check, please wait to submit a check until you receive a confirmation fro the housing bureau .

Credit Card : Visa MasterCard Amex Discover
 Name on Card: _____
 Number: _____
 Expiration Date: _____
 Cardholder Signature: _____

ALL CHANGES MUST BE SUBMITTED IN WRITING!
No exceptions.