

HOUSING RESERVATION FORM

Early Registration Deadline: Thursday, July 11, 2019

79th Annual Meeting of the Academy of Management

Boston, Massachusetts, United States of America · August 9-13, 2019

AOM Member ID: _____

INSTRUCTIONS: The deadline for reservations is **Thursday, July 11, 2019**. For best availability and immediate confirmation, make your reservations online. Additionally, you may mail or fax this form. Only completed forms will be accepted.

MAIL FORMS TO:
 AOM Housing Bureau
 5202 President Court
 Ste. 310
 Frederick, MD 21703

FAX FORMS TO:
 (301) 694-5124
 Please use one form per reservation

INTERNET:
 Visit the Annual Meeting website at:
<https://aom.org/annualmeeting/housing/>

CONFIRMATION: Once your reservation has been confirmed, you will receive a confirmation email from the AOM Housing Bureau. You will not receive a confirmation from your hotel directly. If you do not receive a confirmation within two weeks, please call the AOM Housing Bureau at (800) 967-8852.

ROOM RATES/TAXES: To take advantage of the special meeting rates, book your reservation by **Thursday, July 11, 2019**. After this date, rooms may only be available at higher rates. All rates are per room/per night and are subject to a 14.45% tax. Special requests cannot be guaranteed. Hotels will do their best to honor all requests. Hotels will assign specific room types upon check-in based on availability.

CHANGES/CANCELLATIONS: All changes and cancellations to hotel reservations must be made with the AOM Housing Bureau on, or before, **July 23, 2019**. After this date, all changes and cancellations must be made directly with your assigned hotel. If the reservation is not cancelled within 3 working days prior to arrival, this will result in forfeiture of one night's room and tax.

QUESTIONS: Please contact the AOM Housing Bureau directly with all inquiries related to your hotel reservations: 9am-5pm, ET

SEND CONFIRMATION TO

FIRST NAME:	LAST NAME:
ORGANIZATION/AFFILIATION:	
EMAIL:	
MAILING ADDRESS:	
CITY:	STATE/PROVINCE:
POSTAL CODE:	COUNTRY:
PHONE:	

ACCOMODATION INFORMATION


Arrival Date _____	Departure Date _____	If requested hotels are not available, please process reservation according to: <input type="checkbox"/> Lowest Rate <input type="checkbox"/> Location to Meeting Venues
HOTEL PREFERENCE Please indicate your hotel choices below in order of preference. If your first choice is unavailable, a reservation will be made at the next available property.		

First Choice _____

Second Choice _____

Third Choice _____

ROOM PREFERENCE

<input type="checkbox"/> Single: 1 Person, 1 Bed <input type="checkbox"/> Double: 2 People, 1 Bed <input type="checkbox"/> Db/Db: 2 People, 2 Beds <input type="checkbox"/> Triple: 3 People, 2 Beds <input type="checkbox"/> Quad: 4 People, 2 Beds <input type="checkbox"/> Suite <input type="checkbox"/> King Bed <input type="checkbox"/> ADA 	Name(s) of additional room occupants. Please note that additional charges may apply to a third or fourth person occupying the room. _____ _____ _____
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*Student-Only Housing
 Sponsor Block
 Exhibitor Block
 Placement Block

*AOM Membership ID Number Required for student-only housing: _____

CREDIT CARD INFORMATION (Must be valid through August 2018)

American Express
 Discover
 MasterCard
 Visa

Credit Card Number _____ Expiration Date _____
 Card Holder's Signature _____ Card Holder's Name (Please Print) _____