



67th Annual Meeting
of the Meteoritical Society
August 2 - 6, 2004
Rio de Janeiro, Brazil



ACCOMMODATION FORM

Return this form by fax (+55 21 2525-1230) to the SOFITEL HOTEL.

Last Name		Name	
Accompanying Person's Last Name		Accompanying Person's Name	
Address			
City	State	Zip Code	Country
E-Mail			
Area Code + Phone Number		Area Code + Fax Number	
Arrival Date:		Departure Date:	

I Wish To Reserve

Rates for reservations requested until May 25, 2004		Rates for reservations requested starting May 26, 2004	
<input type="radio"/> Superior Room	\$120.00 USD	<input type="radio"/> Superior Room	\$140.00 USD
<input type="radio"/> Deluxe Room	\$160.00 USD	<input type="radio"/> Deluxe Room	\$160.00 USD
Please indicate below your preference; the hotel will confirm your room type depending upon availability.			
<input type="radio"/> Double Bed	<input type="radio"/> Twin Beds	<input type="radio"/> No Preference	

The above mentioned rates are subject to a 10% service charge, 5% government tax, and city tax of \$3.00 USD. Cancellations must be submitted in writing to the hotel 72 hours prior to scheduled arrival. After this time, the hotel holds the right to charge one night's room rate to the credit card designated below.

- Check-in time: 1400 Check-out time: 1200
- Breakfast is **included** in the daily rate and served at the Atlantis Restaurant from 0600 to 1030
- Reservations and room types are subjected to availability.

Credit Card Type: _____

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Signature: _____

Date: _____

I authorize the hotel to charge one night on the above selected room rate in case of no show

You can cancel your reservation in writing without charges until 72 hours prior to the arrival date. After this, the hotel holds the right to charge the first night on the credit card above.

(To be completed by Sofitel Rio de Janeiro only)
With pleasure we confirm your reservation.

Accepted by: _____

Reservation n°: _____