



475 President Kennedy Avenue, Montreal, QC, Canada H3A 1J7
 Telephone: (514) 286-1986 or 1-877-286-1986

****Please note the address, as there are 2 Delta hotels in Montréal. ****

The **Delta Montreal** is proud to be the host of **AD10 – 2004 (10th World Congress – Anaerobic Digestion)** from August 28 to September 4, 2004. We are looking forward to having you stay with us. For your convenience, please complete and return this hotel guest room reservation form either by mail or facsimile at (514) 284-4342 or by e-mail at deltamontreal@chiphospitality.com.

<u>RESERVATION REPLY FORM</u>		
BLOCK NAME :	GADOT1	
(Print or type)		
Surname : _____ First name : _____		
Address : _____		
City/Prov./State : _____		Postal Code/Zip code : _____
Phone Office: _____	Phone. Res. : _____	Fax : _____
Affiliation/Co./Group : _____		E-mail: _____
<i>CUT-OFF DATE FOR BLOCK OF ROOMS HELD AT THE HOTEL IS JUNE 1, 2004. RESERVATIONS RECEIVED AFTER THIS DATE WILL BE SUBJECT TO FULL RATE ON AVAILABILITY BASIS.</i>		
<u>Special group rate</u> Arrival date : _____ Arrival time : _____ <small>(Check-in starts at 3 PM)</small> Departure date : _____ <small>(Check-out time is noon)</small> Smoking ► <input type="checkbox"/> Non-Smoking ► <input type="checkbox"/> Delta Privilege # : _____	<u>Types of accommodations</u> Please indicate your choice Delta ► 1 king bed ► 1 or 2 persons <input type="checkbox"/> \$199 Delta ► 2 double beds ► 2 persons <input type="checkbox"/> \$199 Delta ► Triple occupancy <input type="checkbox"/> \$219 Delta ► Quadruple <input type="checkbox"/> \$239 Premier ► 1 or 2 persons <input type="checkbox"/> \$219 Signature Club ► 1 or 2 persons <input type="checkbox"/> \$244 Special Requests : _____	<u>Rates*</u> \$199 \$199 \$219 \$239 \$219 \$244

*Rooms subject to \$2.00 housing tax, 7% goods & services tax, 7.5% provincial tax.

Check-in: Before 4:00 PM (Reservation will be held only until 4:00 PM)

After 4:00 PM Please send a deposit by check or money order in Canadian currency payable to **Delta Montreal** for the first night or complete the credit card guarantee details below in order to guarantee the reservation. Please do not send cash.

Card number: _____ Expiry date: _____

Name on the card: _____ Card holder's phone #: _____

Your confirmation number will be faxed to you or left at your business phone number within the next 72 business hours.

CONFIRMATION NUMBER _____