76th CWA Convention

August 6-8, 2017

Hotel Reservation Form

Reservations can be made by choosing one of the following methods:

INTERNET: Book online at https://aws.passkey.com/e/49071221 This is the quickest and most effective method.

EMAIL: Email housing@visitpittsburgh.com for questions/concerns.

FAX: Fax completed form to 412-338-0426

PHONE: Call 1-844-744-ROOM (7666) 9:30 am to 4:30 pm EST M-F for questions/concerns.

All reservations requests will be made through the VisitPITTSBURGH Housing. **DEADLINE: July 10, 2017.** Continue to contact VisitPITTSBURGH Housing for changes/cancellations through **July 21, 2017.**

ACKNOWLEDGEMENTS: Acknowledgements will be sent after each reservation booking, modification and/or cancellation. *Review acknowledgement carefully for accuracy*. If you do not receive an acknowledgement within 3 days after any transaction, please call VisitPITTSBURGH Housing at 1-844-744-ROOM (7666).

MODIFICATIONS/CANCELLATIONS: All reservations must be guaranteed by a valid credit card number. Any reservation not cancelled at least 72 hours prior to 12:00 pm EST of your arrival date will be charged one night's room & tax. If you must depart earlier then you intended to stay, please notify the hotel at or before check-in of any change in planned length of stay to avoid early departure fees (Westin - \$75, Omni - \$116, Wyndham – 50% of room rate).

Hotel Information				
Type of Room:	1 bed/1 perso	_		eds/2 ppl
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# of Rooms:		Departure:		
Hotel Requested (rank in order of preference):				
Westin Convention Center (Retirees, IUE, Overflow) - \$145/night + tax				
Omni William Penn (HQ) - \$155/night + tax				
Doubletree by Hilton & Suites Downtown (PPMWS, Overflow) - \$155/night + tax				
Wyndham Pittsburgh Downtown (TNG, Overflow) - \$155/night + tax				
Taxes – 14% per night (subject to change). Rates are for single/double occupancy, Triple/Quad may be additional.				
Special Requests:				
requests will be processed on a just-come, just serve basis and are not guaranteed. Hotels are an non-smoking.				
Delegate Information				
First Name: Initial: Last Name:				
E-mail Address:			company/onic	on:
Address:				
City:		State: Zip:	Daytim	e/Cell Phone:
Additional Guests in Room: 122.		3		
Down and Information				
Payment Information				
Credit Card:			Evaluation Date:	
Cardholder Billing Address:		_City, State, Zip:		
Name of Card Holder:		Date:	_Signature:	

By signing I authorize my credit card to be charged in compliance with the above referenced cancellation policies should I cancel my reservation.