

## WAILEA MARRIOTT, AN OUTRIGGER RESORT

The Wailea Marriott Resort is a 521-room hotel located in the heart of Wailea, on 22 acres of lush ocean front property. The Hotel features 2 restaurants, 2 lounges, 5 pools, meeting rooms & business center. Surrounded by two white sand beaches, it is centrally located close to shops, dining & entertainment, and only 17 miles from Kahului airport.

### THE BIOELECTROMAGNETICS SOCIETY HOTEL RESERVATION FORM

**\$155** BEMS room rates are \$155 based on single and double occupancy and are inclusive of taxes. **The BEMS block of sleeping rooms is available 6/18/2003 thru 6/30/2003.** Reservations are non transferable. Check in time is 3:00PM and Check out time is 12:00 (Noon).

*A required fee of \$7.25 per person is charged for round trip porter services.*

Children 17 years and under are free when sharing with parent(s) and utilizing existing beds. Additional Charge for 3<sup>rd</sup> adult in the room is \$40.00.

KING BED \_\_\_\_\_ DOUBLE BEDS \_\_\_\_\_ HANDICAPPED ACCESSIBLE \_\_\_\_\_

SMOKING \_\_\_\_\_ NON-SMOKING \_\_\_\_\_ OCEAN VIEW \_\_\_\_\_ MOUNTAIN VIEW \_\_\_\_\_ GARDEN VIEW \_\_\_\_\_

Please complete the information below. A credit card guarantee or a one-night deposit is required. Cut off date is 5/22/2003. After that date, reservations will be taken only on a space available basis. Deposit becomes non-refundable 72 hours prior to arrival. No-Shows and cancellations within 72 hours of arrival date will be assessed a charge for room and tax for the entire stay.

NAME: \_\_\_\_\_ SHARED WITH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ARRIVAL DATE: \_\_\_\_\_ FLIGHT NUMBER & TIME: \_\_\_\_\_

DEPARTURE DATE: \_\_\_\_\_ FLIGHT NUMBER & TIME: \_\_\_\_\_

**Please Return This Form And One Night's Deposit To:**

**Wailea Marriott  
Group Reservations  
3700 Wailea Alanui  
Wailea, Maui, Hawaii 96753  
Tel. 1-800-367-2960 Or 1-808-879-1922 Fax 1-808-875-4878  
E-mail: [owr.reservations@waileamarriott.com](mailto:owr.reservations@waileamarriott.com)**

#### CREDIT CARD INFORMATION:

CARDHOLDER NAME: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

TYPE OF CARD: \_\_\_\_\_ CARD NUMBER: \_\_\_\_\_

CARDHOLDER SIGNATURE: \_\_\_\_\_