



World Synchronized Skating Championships® 2010
April 9 - 10, 2009 – Colorado Springs, USA



THIS FORM MUST BE RETURNED BEFORE November 1, 2009
Please fill in with type or write in capital letters

ACCOMMODATION INFORMATION

(Separate form for each Team)

FORM F

ISU Member Federation: _____

Team Name: _____

Team Manager Name: _____

Contact Person: _____

Phone Number: _____

Fax Number: _____

E-mail: _____

Hotel Request:

All hotel reservations and pre-payment of hotel rooms in the Official Hotels, will be made by the Teams, according to the conditions specified on pages 8 -10 of the Announcement.

Name of Hotel: _____

Number of requested Rooms:

TOTAL	_____
Single	_____
Double	_____
Triple	_____

TERMS OF RESERVATION:

1. The Member Federation must make all requests for reservations through the Organizing Committee and not later than **November 1, 2009**.
2. The room rates are specified on page 9 of the Announcement.
3. The reservations will be confirmed to Teams directly from the Official Hotel, after getting permission by the Organizing Committee. After acceptance of the reservation, Member Federation will receive Invoice for pre-payment until **November 15, 2009**.
4. Terms of payment:
 - 50% of pre-payment upon Invoice from the Official Hotel until **December 1, 2009**.
 - the rest 50% of payment upon Invoice from the Official Hotel until **March 18, 2010**.
5. Changes and cancellations shall be made in writing directly to the Organizing Committee.
6. Cancellation and refund policies (less banking charges):
 - Refund of 100% of pre-payment - cancellation until January 15, 2010
 - Refund of 50% of pre-payment - cancellation between January 16 and February 15, 2010
 - Refund of 25% of pre-payment - cancellation between February 16 and March 18, 2009
 - No refund - cancellation after March 19, 2009

ISU Member Representative: _____

Date, Signature: _____

Return by November 1, 2009 to:

U.S. Figure Skating Headquarters
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 20 First St.
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