

RESERVATION REQUEST FORM **BMO FINANCIAL GROUP INSTITUTE FOR LEARNING**

U of T Health Promotions Summer School

TUESDAY JULY 7, 2009 TO FRIDAY JULY 10, 2009

DINNER/BED & BREAKFAST RATE @\$160.00 PER PERSON, PER NIGHT + TAXES

ROOMS WILL BE RESERVED AT THE INSTITUTE FOR LEARNING BASED ON AVAILABILITY. ALTERNATIVELY WE WILL MAKE ARRANGEMENTS AT A NEARBY OFFSITE HOTEL (SHUTTLE SERVICE AND IFL MEALS INCLUDED). YOU WILL BE ADVISED OF LOCATION ONE WEEK PRIOR TO YOUR CHECK IN DATE.

PLEASE NOTE: AT 90 DAYS OUT, ANY ROOMS THAT ARE NOT PICKED UP FROM THE BLOCK WILL BE RELEASED. INDIVIDUALS MAY STILL CALL IN TO MAKE RESERVATIONS AND IF GUEST ROOMS ARE STILL AVAILABLE, WE WILL TAKE THE RESERVATION.

ARRIVAL DATE	DEPARTURE DATE
TITLE: FIRST NAM	LAST NAME:
MAILING ADDRESS:	Сітү:
Prov:Postal Code	PHONE (DAY TIME):
E-Mail:	
METHOD OF PAYMENT:	
WHICH SHALL BE PAID BY TH	E RESPONSIBLE FOR PAYMENT OF GUESTROOMS, ANY INCIDENTAL CHARGES, PLUS APPLICABLE TA GUEST PRIOR TO DEPARTURE. ACCORDINGLY A VALID CREDIT CARD MUST BE SUPPLIED AT THE TIMI CHECK-IN TIME BY ALL GUESTS.
TYPE OF CREDIT CARD (PLEA AMERICAN EXPRESS VISA MASTER CARD	E MARK WITH AN X):
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(IF CREDIT CARD HOLDER IS	DIFFERENT THAN THE REGISTERED GUEST, KINDLY FAX A LEGIBLE PHOTO COPY OF THE CREDIT CARE REDIT CARD HOLDER SIGNATURE TO 416-490-4443, AT YOUR EARLIEST CONVENIENCE)
BILLING ADDRESS:	
CANCELLATION/CHANG	Policy:

For cancellation of any guest-room reservation, 14 business days notice prior to arrival is required. Any cancellation after that time will result in one room night plus applicable taxes being charged to the individual participants Credit Card.

CHECK-IN: ANYTIME AFTER 3:00PM CHECK -OUT: ANYTIME BEFORE: 1:00PM

+ PLEASE COMPLETE THE ABOVE AND SUBMIT VIA EMAIL AT IFL.RESERVATIONS @BMO.COM . A CONFIRMATION EMAIL WILL BE SENT TO YOUR ATTENTION SHORTLY +

> IF YOU NEED ASSISTANCE OR HAVE ANY QUESTIONS PLEASE CONTACT THE RESERVATION DEPARTMENT AT (416) 490-4300. WE LOOK FORWARD TO WELCOMING YOU!