SOT | Society of Toxicology

Group Housing Sub-Block Booking Agreement
SOT Annual Meeting and ToxExpo
Salt Lake City, UT —March 10–14, 2024

This is your Group Sub-Block Booking Agreement for 10 or more hotel rooms for the Society of Toxicology's 63rd Annual Meeting being held March 10-14, 2024, in Salt Lake City, UT.

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This form will be accepted beginning **Monday, July 24, 2023.** Upon completion of the form, please send it to us only through Secure eFax at 725-218-1546.

COMPANY INFORMATION

Send Acknowledgment to (please print or type):

Company: _____

Contact: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ Fax: _____

Email: _____

HOTEL PREFERENCES

Rooms are assigned on a first come, first served basis. Every effort will be made to place you at one of the preferred hotels. If your preferred hotel is not available, you will be assigned the next available hotel in order of preference. Please note that the Hyatt Regency Salt Lake City will be the Headquarters Hotel for SOT. If you require fewer than 10 rooms, please go to our Annual Meeting website to book individual rooms directly. **The Hyatt Regency Salt Lake City (Headquarters hotel) is sold out.**

1. _____ 3. _____

2. _____ 4. _____

Please fill in the number of rooms per day that you wish to hold for your company using the following table.

Date:	3/7	3/8	3/9	3/10	3/11	3/12	3/13	3/14	3/15
Day:	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri
Single (one occupant, one bed)									
Double (two occupants, one bed)									
Double-Double (two occupants, two beds)									
Triple (three occupants, two beds)									
Totals									

***Room types are not guaranteed and are based on availability.**

SUITES NEEDED

Hotel Preference: _____

Arrival: _____ Departure: _____

Suite Type: ☐ One Bedroom ☐ Two Bedroom

Will you be using this suite for hospitality? ☐ NO ☐ YES If yes, how many people? _____

All Hospitality Suites must be approved by SOT. Once approved, your request will be sent to the hotel for follow-up by a sales representative who will assist with types and pricing.

CREDIT CARD INFORMATION

Credit Card Number: _____ Expiration Date (must be valid through 3/24): _____

Name as it appears on the card: _____Company: _____

Signature of cardholder: _____

A credit card is required to secure your hotel reservation. A credit card will be required upon check-in unless pre-payment is made in advance.

ROOM ASSIGNMENTS

Group sub-block inventory must be assigned to individual guest reservations on or before **Wednesday, January 10, 2024**. Below are the options we recommend when assigning your rooms:

- **Individual Bookings Online**: A Sub-block link that connects directly to the room inventory within your confirmed block will be sent to you. You can send this link to anyone that you would like to be able to book a room in your block.
- **Bulk Booking Online or Online Rooming List**: By request, we provide an online dashboard so you can enter multiple reservations, view or modify reservations, run reports, monitor critical stats and more at your convenience.
- **Rooming List Submittal**: A complete Rooming List may be submitted via email, fax or mail. Any rooms not accounted for on this rooming list will be automatically released. Any additional nights or reservations requested will be based on availability. A standard rooming list format is available upon request. The rooming list must include the following information for each reservation:
  - ✓ Names—including parties sharing rooms
  - ✓ Arrival and departure dates
  - ✓ Room type preferences—request one or two beds, smoking or non-smoking and any ADA requirements,etc.
  - ✓ Payment information (if different from credit card used to hold group block)
  - ✓ Contact information (if different than the company information on page 1)

SOT Official Housing Bureau - Connections Housing
950 Scales Road, Bldg. 200
Suwanee, GA 30024
Housing Manager: Jay Pierce
Email: SOT@connectionshousing.com
Phone: 404-842-0000; Fax: 725-218-1546

CANCELLATION POLICY

Cancellation of any rooms within a group block at any time after **February 1, 2024,** will be assessed a one night room and tax processing fee per reservation.

RESPONSIBILITY AND LIABILITY

SOT Housing Bureau and the Society of Toxicology shall not be responsible for the actions of the hotel and will not be held accountable for any change or modification to this agreement caused by a change in room availability or other changes made at the hotel's discretion regardless of the terms of this agreement. By submitting this reservation, I give Connections Housing consent to use this personal data to process this reservation, provide housing services on behalf of the event organizers, and contact me in the future with notifications and/or reminders relating to this event.

Please sign this agreement and return to SOT Housing Bureau.

Agreed to by:

Signature: _____

Name: _____

Title: _____ Date: _____