

Housing Reservation Form



Housing Deadline: Friday, February 20, 2026

Reservation Methods (CHOOSE ONLY ONE OPTION)

- A. **ONLINE** Visit www.toxicology.org/housing
B. **FAX** to 725.218.1546
C. **CALL** 404.842.0000; **Hours of Operation:** 9:00 AM–6:00 PM (ET), Monday–Friday

Society of Toxicology 65th Annual Meeting

March 22–25, 2026
San Diego, California

ACKNOWLEDGEMENT

A reservation acknowledgment will be emailed, faxed, or mailed to you once your reservation has been booked. (You will not receive a confirmation from your hotel.) If you do not receive an acknowledgment within three (3) business days, please call Connections Housing at 404.842.0000.

By submitting this form, 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 related to this event.

CHANGES/CANCELLATIONS

The deadline for new reservations is Friday, February 20, 2026. You may make changes and/or cancellations on line or by contacting Connections Housing at 404.842.0000.

The hotel will charge the first night's room and tax to individuals who cancel their reservations within 72 hours prior to the day of arrival or who do not arrive at all. Early departures are subject to penalty fees set by the hotel.

For best availability and immediate confirmation, make your hotel reservation online (www.toxicology.org/housing) or via phone 404.842.0000. Faxed and mailed housing requests will take longer to process, and your hotel selections may not be available.

Arrival Date:	Departure Date:	
Last Name:	First Name:	MI:
Company:		
Street Address:		
City:	State/Country:	Zip/Postal Code:
Daytime Telephone:	Fax:	
Email:		

☐ ATTENDEE ☐ EXHIBITOR

ADA Special Needs: _____

INDICATE HOTEL CHOICE AND TYPE OF ACCOMMODATION

HOTEL CHOICES (List in the order of your preference)

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Hospitality suites must be booked and approved through SOT.
Please send your request to SOT@ConnectionsHousing.com

If all six (6) requested hotels are unavailable, please process this reservation according to: (Check one)

☐ ROOM RATE ☐ LOCATION

TYPE OF ACCOMMODATIONS

*Bed type request is based on availability.

- | | |
|--|--|
| <input type="checkbox"/> 1 person/1 bed | <input type="checkbox"/> 2 people/1 bed |
| <input type="checkbox"/> 2 people/2 beds | <input type="checkbox"/> 3 people/2 beds |
| <input type="checkbox"/> 4 people/2 beds | |

NAME(S) OF ALL ROOM OCCUPANTS

Please note that additional charges may apply to a third or fourth person occupying the room. Please indicate age, if a child.

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

RESERVATIONS/GUARANTEE

All reservations for housing must be made through Connections Housing and NOT directly with the hotels. All housing forms must be received by **Friday, February 6, 2026**. A credit card is required to secure your hotel reservation. Forms received without credit card information will not be processed.

The hotel will charge the first night's room and tax to individuals who cancel their reservations within 72 hours prior to the day of arrival or who do not arrive at all. Early departures are subject to penalty fees set by the hotel.

Credit Card: ☐ American Express ☐ MasterCard ☐ Visa ☐ Discover

Account Number: _____

Expiration Date (Must be valid through 3/26): _____

Name on Card (As it appears on card; please print): _____

Cardholder's Signature: _____