## **Brown University Housing Registration Form**

American Association for Artificial Intelligence July 25 - August 1, 1997 Brown University Providence, RI 02912

PLEASE PRINT:				
NAME:Last	First	Middle Initial	SEX: □ M	□ F
MAILING ADDRESS: _				
-				
TELEPHONE NUMBER:			D. :	
E-MAIL ADDRESS:	Home		Business	
ARRIVAL DATE:		TIME:		
DEPARTURE DATE:		TIME:		
HOUSING PREFERRED	:			
Nights in an air-	\$			
Nights in a single	\$			
Nights in a doub	\$			
NAME OF PERSON SHAP	RING WITH YOU:			
☐ Please assign a ro	oommate for me.			
(If we are unable	to assign you a roommate, you	will be billed for a single room	m.)	
	ТО	TAL HOUSING:	\$	
PARKING: (Necessary on	ly if staying in on-campus ho	ousing)		
nights @ \$1.00/n	ight x cars	TOTAL PARKING:	\$	

continued on reverse

\$ \_\_\_\_\_

TOTAL DUE:

	Your room reservation must be guaranteed by completing to rd, VISA and American Express only. One night's payment after July 21, 1997.	
Credit Card Type (Master Card, VISA, Am EX only)	Credit Card Number	Expiration Date
Name on Credit Card (Please print)	Signature of Authorization	
1 0 0	rchase Order, please check here. You must list credit card your reservation until the purchase order is received.	

Please return this housing registration form by June 21, 1997 to: Brown University, Conference Services, Box 1864, Providence, RI 02912. Or FAX to (401) 863-7300. Reservations cannot be made by telephone. Reservations received by June 21 will be confirmed. Cancellations or changes must be submitted in writing directly with Brown University Conference Services.

## PLEASE RETURN THIS FORM BY JUNE 21, 1997.

Please indicate below if you have any physical impairments or dietary requirements which we should know about to help make your stay on the Brown campus as comfortable as possible: