

**SOUTHEASTERN SURGICAL CONGRESS SCIENTIFIC MEETING AND POSTGRADUATE COURSES
FEBRUARY 20 - 23, 2010 - WESTIN SAVANNAH HARBOR**

Arrival Date: _____ (Check-in 3 PM) **Departure Date:** _____ (Check-out 12:00 PM)

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Fax Number** _____

E-mail _____

We look forward to welcoming you to the **WESTIN SAVANNAH HARBOR**. In order to guarantee your reservation, please enclose a one-night room deposit, including 13% tax and \$1.75 city occupancy tax. There is also a Resort fee of \$19.00 plus tax per night. Reservations received without a deposit will not be confirmed. To reserve a guest room, reservations must be received by **JANUARY 27, 2010**. Rooms based on group availability.

Special Requests (subject to availability) can be made by calling the Westin Savannah Harbor directly.

 If you have special needs, please check here and explain: _____

Accommodations	Single	Double
Group Rates*	\$229.00	\$229.00
No of Rooms Requested	_____	_____

Number of Adults ____ Children ____ There is a \$25.00 per person charge per night, plus tax, for more than two adults in one room.

The above will be honored (2) days prior and (2) days following official group dates listed based on availability. Your deposit will serve as your confirmation.

Cancellation Policy: Deposit will be refunded if cancellation notification is given **3 days prior** to arrival. Please make note of cancellation number in order to receive refund.

Early Departure Policy/Charges: Each individual's departure date will be reconfirmed at the time of check-in. After check-in, any early departure will result in a one night room and tax fee.

PAYMENT METHOD

Diners Club MasterCard Visa Discover Card Carte Blanche American Express

Check \$ _____ (Payable to Westin Savannah Harbor)

Card Number _____ **Exp. Date** _____

Signature _____

This signature authorizes the Westin Savannah Harbor to charge the above account for one night's room and tax deposit

To make reservations, changes or cancellations
Westin Savannah Harbor
One Resort Drive, PO Box 427
Savannah, GA 31421
Phone 866/716-8108 FAX 912/201-2001