Hotel Room Block Request Form



59th ASHP Midyear Clinical Meeting & Exhibition

December 8-12, 2024 | New Orleans, Louisiana | Ernest N. Morial Convention Center

IMPORTANT DEADLINES

OCTOBER 4, 2024 A complete

☐ Comparable Room Rate

Comments:

A complete rooming list with names and guarantee for each reservation must be submitted for all blocks held. Any

rooms not reserved will be released. Requests for additional rooms will be based on availability.

NOVEMBER 8, 2024 Final cut-off date for reservations.

THREE WAYS TO SUBMIT YOUR ROOM BLOCK REQUEST — DO NOT MAIL TO ASHP

You may also submit ONLINE.

EMAIL

ASHP@orchid.events

FAX

801-355-0250

MAIL

ASHP/Orchid Events 6905 S. 1300 E. #220, Cottonwood Heights, UT 84047

| | | CONTACT INFO | RMATION | |
|--|----------------------------|----------------------------|-------------------------------------|--|
| Name: | | | | |
| Company: | | Booth # | t: | |
| Address: | | | | |
| Phone: | Fax | STATE | zip Email: | COUNTRY |
| An acknowledgement of you not receive a confirmation fr | | ent directly to you by C | Orchid.Events. Please review all in | nformation for accuracy. You will |
| · · | | * | 0 , 1 | g this box you are consenting to Orchid. com reservations and related services. |
| Events and view state of the h | mermation solely for the p | surpose of making and con | mmameding to you about your motern | com escribins and related services. |
| | | HOTEL PREF | ERENCE | |
| Hotel and room type prefere location. | nces will be honored t | to the extent accommo | dations are available. Refer to th | ne hotel list and map for rates and |
| 1st Choice: | | | | |
| 2nd Choice: | | | | |
| 3rd Choice: | | | | |
| 4th Choice: | | | | |
| | | | | |
| If we are unable to secure yo | ur entire block in your | r first choice hotel, plea | se (check one): | |
| ☐ Reserve all rooms in ne | xt available hotel | ☐ Split the block b | etween the hotels listed | |
| If all five (5) choices are una | vailable, please proces | s this reservation acco | rding to the above and based on | (check one): |

☐ Proximity to the Ernest N. Morial Convention Center

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ROOM BLOCK

Room block flow must be based on previous year's final room night pick up and is subject to ASHP's approval.

| EXHIBITOR DAY/DATE | MOVE IN FRI 12/6 | MOVE IN SAT 12/7 | MOVE IN SUN 12/8 | SHOW MON 12/9 | SHOW TUE 12/10 | SHOW WED 12/11 | MOVE OUT THU 12/12 | TOTAL | |
|--|---------------------|---------------------|---------------------|------------------|-------------------|-------------------|-----------------------|-------|--|
| # of Rooms | | | | | | | | | |
| Check if additional accommodation types are requested* □ 1 or 2 Bedroom Suite □ Hospitality Suite | | | | | | | | | |
| * Orchid.Events will contact you for additional information. | | | | | | | | | |
| Special Requests: | | | | | | | | | |
| Hotel will honor special requests to the extent possible, but requests are not guaranteed. Hotel will assign specific room types upon check in | | | | | | | | | |

Hotel will honor special requests to the extent possible, but requests are not guaranteed. Hotel will assign specific room types upon check in based on availability. Suite availability and rates are available through Orchid. Events. Please email <u>ASHP@orchid.events</u>, call 877-505-0675, or mark the appropriate box above and we will send additional information.

ROOM BLOCK POLICIES

Hotel room blocks are for qualified exhibitors, sponsors, and/or approved attendee groups. Qualified exhibitors or sponsors must have submitted a contract for exhibit space or sponsorship prior to requesting hotel rooms. All reservations must be made through Orchid. Events and are subject to ASHP's approval. All personnel must be registered for the meeting in order to receive the convention rate. Any company or attendee group who does not adhere to these procedures may be subject to denial of exhibit space, hotel rooms, and or request for meeting space at future ASHP meetings.

RESERVATION GUARANTEE

Room block requests will be reviewed and approved based on the 2023 Midyear Clinical Meeting final room night pickup. All rooming lists must be accompanied by individual credit card guarantee for one night's room and tax deposit. Tax is currently 16.2%, plus \$1-\$3 per room per night occupancy fee (subject to change). Reservations received without a valid guarantee/deposit will not be processed.

CANCELLATIONS/CHANGES

Cancellations and changes to the names of occupants or arrival and departure dates must be made directly with Orchid. Events. Cancellations after **October 4, 2024** will be subject to a \$75.00 cancellation processing fee, per reservation. If a cancellation occurs within 2 to 7 days (depending on hotel) of arrival date the deposit of one night's room and tax will be forfeited entirely. Please refer to your hotel's individual cancellation policy found on your acknowledgment letter. Cancellations and changes should be emailed to <u>ASHP@orchid.events</u>.

| | | | | reserving a room | |
|--|--|--|--|------------------|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Signature Date

Please keep a copy of this form. Make additional copies if needed.

Orchid. Events is the ONLY ASHP designated housing provider for the 2024 ASHP Midyear Clinical Meeting. Beware of unauthorized housing companies who have been approaching ASHP attendees and exhibitors offering hotel reservations via unauthorized or even sham websites, e-mail communications, and phone calls. These companies are in no way affiliated with ASHP, the Midyear Clinical Meeting, or Orchid. Events. Neither ASHP nor Orchid. Events can verify the authenticity of these companies or the reservations.

