

ASSOCIATION OF ORTHODOX JEWISH SCIENTISTS

2009 Annual Summer Convention

July 31st-August 2nd, 2009

The Heritage Hotel, Southbury, CT

Adult(s) Name(s) (Include Titles): _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Daytime Phone: _____ Evening Phone: _____

ACCOMODATIONS: Rates listed are for a two day minimum stay, per person. **Registration fee, taxes, and gratuities (dining room and chamber maid only) are included.** (Check all that apply **X** the quantity of rooms):

Double Occ. (\$375 p/p) x _____ Triple Occ. (\$320 p/p) x _____ Single Occ. (\$550 p/p) x _____

of Adults: _____ Age(s) (if single): _____ Do you require a roommate? _____ Roommate request: _____

Children ages 12-16 rooming with **two adults**, eating in main dining room, \$225 per child (rate includes cot):

of Children: _____ Name(s): _____ Ages: _____ x\$225

Children ages 6-11 rooming with **two adults**, eating in main dining room, \$150 per child (rate includes cot):

of Children: _____ Name(s): _____ Ages: _____ x\$150

Children under 5 rooming with **two adults**, FREE, except for crib or cot charge of \$25 if ordered in advance. The charge will be \$15 per day if not ordered in advance. **Please indicate if you will need a crib or a cot in your room:**

of Children: _____ Name(s): _____ Ages: _____ Cot
 Crib

Maximum # of occupants per room- including children: 4

(Please note, only 1 cot and/or 1 crib may be placed in a room due to safety measures.)

TOTAL ACCOMODATIONS COSTS: \$ _____

❖ CANCELLATIONS ON OR AFTER JULY 30TH AND NO-SHOWS ARE NON-REFUNDABLE ❖

AMOUNT ENCLOSED (\$150 NON-REFUNDABLE minimum deposit per person): \$ _____

BALANCE (due by July 23rd, 2009): \$ _____

ALTERNATIVELY, please charge my credit card:

Card #: _____ / _____ / _____ / _____ Expiration Date: _____ / _____ Amount to be charged: \$ _____

Signature: _____

Please make checks payable to **AOJS** and submit all information to the AOJS office at:

1011 Moss Place, Lawrence, NY 11559

or fax to (718) 554-3069

For further information, contact the AOJS office during normal business hours at

(718) 969-3669 (leave a message-we will return your call) or at nachamu@aojs.org.

SPECIAL REQUESTS:

