

**AUTHORIZATION FOR PAYMENT OF ACCOMMODATION
 AT GAGE TOWERS, WALTER GAGE RESIDENCE**

**Canadian Ultimate Championships
 08/18/04 - 08/22/04**

PLEASE PRINT

TEAM NAME: _____

TEAM LEADER'S NAME: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

_____ nights <i>(number)</i>	x	\$41.40 <i>(rate per night inc. taxes)</i>	= \$	_____ <i>(total amount)</i>
---------------------------------	---	--	------	--------------------------------

- The Team Leader is responsible for full payment of the above charges by July 26, 2004.
- Room charges may be paid by corporate or certified cheque, VISA, MasterCard or AMEX.
- If room charges are not pre-paid, a credit card number and expiry date are required to guarantee the room block.
- There will be no refunds for cancellations, no-shows, late arrivals or early departures; substitute reservations over the same dates and in the same room types are accepted.
- Declined transactions or NSF cheques may be subject to an additional administration fee

PAYMENT METHOD

Check one:

- I enclose a cheque (corporate or certified; no personal cheques) in the amount above, payable to "Conferences & Accommodation at UBC".
- I authorize the amount above to be charged to the credit card indicated below by July 30, 2004.

CREDIT CARD INFORMATION

VISA MC AMEX

Please circle one

_____ *Credit Card Number*

_____ *Expiry Date*

_____ *CARDHOLDER'S NAME: (Please Print)*

_____ *CARDHOLDER'S SIGNATURE:*

FOR OFFICE USE ONLY:	BLOCK CODE # _____	A/R # _____
----------------------	--------------------	-------------

Please complete and return this form with the Guest List before July 26, 2004