



ACCOMMODATION REQUEST FORM Cardiac Physiome 2015 8th, 9th and 10th April 2015

CONTACT DETAILS: Please complete and e-mail to uoa@apx.co.nz or Call +64 9 3753999 for more information										
PREFERRED TITLE:	Mr / Mrs / Mis	s / Ms / Dr / Asso	c Prof / Prof / Oth	er	GENDER	:	MALE / FEM	ALE		
NAME/S OF GUEST/S:										
TELEPHONE:	+ ()		MOBILE:	+ ()		FAX:	+ ()			
STREET ADDRESS					EMAIL:		@			
ARRIVAL DATE:		1	/ 20		RE DATE:		1	/ 20		
ARRIVAL TIME:		:	AM / PM		RE TIME::		:	AM / PM		
NUMBER OF NIGHTS:										
ACCOMMODATION Rates are room only a										
THE STAMFORD ***	**			THE PULL	.MAN ****	*				
22 – 26 Albert Street, Auckland City				Corner Pri	Corner Princes Street & Waterloo Quadrant, Auckland City					
Classic room \$197 per night	:			Superior Roo	om \$160.87 per	night				
QUADRANT HOTEL ★	***			RENDEZV	OUS GRAND	HOTEL AU	JCKLAND **	***		
10 Waterloo Quadrant, Auckland City				Cnr Mayoral and Vincent Streets, Auckland City						
Studio Room \$115 per night	ī			Standard Ro	om \$140.60 per	night				
CROWNE PLAZA AUCKLAND ****				COPTHORNE HARBOUR CITY ****						
128 Albert Street, Auckl	and City			196-200 Qu	uay Street,, Au	ckland City				
King Room \$173.04 per nigh	nt			Standard roc	om \$102.61 per	night				
	*			HERITAGE	AUCKLAND	****				
Corner Federal & Victoria Streets, Auckland City				35 Hobson Street, Auckland City						
King Room \$170.50 per nigh	nt			Standard roc	om \$145.20 per	night				
SCENIC HOTEL AUCKLAND ****				AUCKLAN	AUCKLAND CITY OAKS $\star \star \star \star$					
380 Queen Street, Auckland City				188 Hobson Street, Auckland City						
Standard Room \$118.80 per	night			l bedroom \$	\$110.00 per nigh	t				

Conditions of Reservation:

All bookings and pricing are subject to availability at time of booking. Pre-booking is essential. Credit card details are required to confirm the reservation. We recommend booking an extra night should you require an early check-in or late departure. All hotel bookings are subject to the individual hotel's terms and conditions. **Booking fee of \$34.60 plus GST will apply.**

CREDIT CARD AUTHORISATION FOR DEPOSIT:

Ihereby authorise APX to use the following credit card details to confirm my preference as above:								
NAME ON CARD:								
CARD NUMBER:								
TYPE OF CARD:	VISA / MASTERCARD / AM	1ERICAN EXPRESS	(CIRCLE ONE)					
EXPIRY DATE:	/20	SECURITY NUMBER:						
CARDHOLDER SIGNATURE:								