HOTEL RESERVATION FORM 2002 Symposium on VLSI Technology and Circuits, June 11 - 15, 2002 The Hilton Hawaiian Village, Honolulu, Hawaii

Please reserve the following:	Please Print or Type	
Name (Family Name, First Name, Middle Initial)		
Company		
Address		
City/State/Zip/Country	Telephone Number	
Sharing a room with:		

Reservations must be received by the Hilton Hawaiian Village **NO LATER THAN MAY 10, 2002** to qualify for a room under the VLSI Symposia room block. Rooms must be guaranteed by a credit card or advance deposit. The hotel will send a confirmation.

Departure Dat	e e: 2:00 pm Check-c	_at	_am/pm		Garden View Partial Ocean View Ocean View	Circle Rate \$177 \$214 \$247		Return Form and Deposit directly to: Reservations Hilton Hawaiian
I would like a non-smoking room I will require a handicapped room GUARANTEED RESERVATIONS: Indicate one of the following: A. Credit Card:								Village 2005 Kalia Road Honolulu, Hawaii 96815-1999 Tel: 808-949-4321 Fax: 808-948-7660
	Card Name (Visa	, Mastercard, e	etc.) Caro	d Num	ber	Expiration Da	ate	
	Signature							

B. First Night Deposit Enclosed \$_____ (Make Check payable to Hilton Hawaiian Village, US Dollars Only)