LOS ANGELES FASHION MARKET

california | market center

june 6-10, 2008

HOTEL RESERVATION FORM

CMC TRAVEL

Please print clearly and complete all fields. **Fax to 213.630.6805.**

1. la fashion market visitor type

(Please select your business category for CMC's LA Fashion Market.)

❍ New Buyer ❍ Returning Buyer ❍ New Exhibitor ❍ Returning Exhibitor ❍ Showroom Rep ❍ Other:_____

2. hotel preferences

(Rooms are available on a first-come, first-served basis. Availability and rates are subject to change. Last updated: 05.7.08)

DOWNTOWN | HOST HOTELS	CMC RATES
Millenium Biltmore	$145 single | $145 double | $175 triple | $195 club floor | $225 club floor triple
Kyoto Hotel	$149 single | $149 double
Sheraton Downtown L.A.	$149 single | $149 double
O Hotel	$159 queen
Omni Los Angeles	$169 single | $169 double | $189 triple | $209 quad | $550 suite
The Standard	$169 queen | $179 king | (sold out) ~~$189 two kings~~
Hilton Checkers	$179 single | (sold out) ~~$179 double~~

WESTSIDE | HOST HOTELS*	CMC RATES *__NOTE: SHUTTLE SERVICE IS NOT AVAILABLE FOR HOST HOTELS ON THE WESTSIDE.__
Avalon Hotel | Beverly Hills	$265 classic room (double, queen or king) | $295 premium room (double or king)
Hollywood Roosevelt Hotel	$279 king/double superior | $299 king/double deluxe | $319 studio king | $369 king suite (rates expire June 3)
Sofitel LA | West Hollywood	$279 single | $309 double (rates expire May 9)

HOTEL PREFERENCE | (List by name your top 3 hotel choices in order of preference.)

1)_____ 2)_____ 3)_____

Special Request:_____

3. room information

(Please print your name, company information, and CMC Attendee # if applicable. Please use a separate form for each additional room.)

NAME_____ CMC Attendee #_____

COMPANY_____

(Names of persons sharing room and buyer information if applicable - maximum of 4 people permitted per room.)

Name_____ ❍ New Buyer ❍ Returning Buyer CMC Attendee #_____

Name_____ ❍ New Buyer ❍ Returning Buyer CMC Attendee #_____

Name_____ ❍ New Buyer ❍ Returning Buyer CMC Attendee #_____

Name_____ ❍ New Buyer ❍ Returning Buyer CMC Attendee #_____

(Please indicate the type of room you are requesting and your expected arrival/departure dates.)

❍ single ❍ double (2 beds) ❍ other:_____

SPECIAL REQUESTS ❍ rollaway bed ❍ non-smoking ❍ smoking

ARRIVAL DATE _____/_____/_____ (mm dd yy) **DEPARTURE DATE** _____/_____/_____ (mm dd yy)

4. deposit

CARD TYPE_____

CARD #_____

EXP DATE_____

NAME ON CARD_____

SIGNATURE_____

5. cancellation policy

Some hotels may require more than one night's room and tax deposit or have a stricter cancellation policy. Please refer to your confirmation for the policy that applies to your hotel.

6. confirmation

(We will send a confirmation to the information provided here within 72 hours. If a confirmation is not received, please contact CMC Travel.)

NAME_____ **COMPANY**_____

STREET ADDRESS_____

CITY_____ **STATE**_____ **POSTAL CODE**_____ **COUNTRY**_____

NAME_____ **COMPANY**_____

TEL_____ **FAX**_____ **E-MAIL**_____