

**SPEAKER/MODERATOR
HOTEL ROOM RESERVATION FORM**

2019 CityLaunch
San Diego, California
March 10 - 12, 2019

Speaker/Moderator Name: _____

Company/Employer: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

HOTEL RESERVATION - HARD ROCK HOTEL, SAN DIEGO

Arrival Day/Date/Time: _____

Departure Day/Date/Time: _____

Room Preferences: Number of persons: _____ Number of beds: _____

ADA Room (Special Needs): _____

All reservations must be guaranteed. You may guarantee your reservations by providing the following credit card information.

Card Type: AMEX MasterCard VISA

Card No.: _____ Exp. Date: _____ Security Code: _____

Name As It Appears On Card: _____

Cardholder Billing Address: _____

City: _____ State/Region: _____ Zip Code: _____ Country: _____

Authorized Signature X: _____

Note: Your hotel reservation confirmation will be sent directly to you from our housing contractor.

Connected Communities Collaborative
c/o CityLaunch Speaker Coordinator
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