



Hotel Reservation Form

Group Name:	<i>Law and Society Association</i>
Name of Guest:	
<i>address</i>	
<i>phone number</i>	
<i>fax number</i>	
Arrival Date:	
Departure Date:	
Single or Double Occupancy:	
Credit card number:	
<i>expiry date:</i>	
<i>signature:</i>	
<i>Special Requests:</i>	
<i>(sm/non)</i>	
<i>Estimated Arrival Time:</i>	

- ***please note: all of the bolded items above must be completed to reserve your room***

Sheraton Vancouver Wall Centre Reservations

Fax To: 604-893-7123

Toll Free Line 1-800-663-9255

Email: reservation@wallcentre.com



