

**TRAVEL/HOUSING RESERVATIONS**  
**THE ESSENTIALS OF NEURORADIOLOGY AND HEAD & NECK IMAGING:**  
**WAYS TO IMPROVE YOUR CLINICAL PRACTICE**  
**FOUR SEASONS HUALALAI, HAWAII, THE BIG ISLAND • JANUARY 29-FEBRUARY 2, 2007**

**BOOK ON LINE AT:** <https://www.tpires.com/nyuh/index.htm>

Or Complete and Fax To:  
 Travel Planners, Inc.  
 Phone: 210-341-8131 or 800-531-7201  
 Fax: 210-341-5252  
 Email: NYU@tpires.com


**DEADLINE FOR RESERVATIONS:**  
**NOVEMBER 20, 2006**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Spouse/Guest \_\_\_\_\_  
 Child(ren) \_\_\_\_\_ Age \_\_\_\_\_ Child(ren) \_\_\_\_\_ Age \_\_\_\_\_  
 Mailing Address: ( ) Home ( ) Office \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Home Phone( ) \_\_\_\_\_ Business Phone( ) \_\_\_\_\_  
 Fax( ) \_\_\_\_\_ E-Mail \_\_\_\_\_

**1. HOTEL RESERVATIONS:** Four Seasons Resort Hualalai - Place a 1, & 2 to indicate your room preference.

\_\_\_\_\_ Golf/Ocean View @ \$475 \_\_\_\_\_ Ocean View @ \$550

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_ # of nights \_\_\_\_\_  
 Comments \_\_\_\_\_

 *If you have special needs, please attach a separate letter.*

**2. AIRLINE RESERVATIONS**

Arrange air transportation from (city) \_\_\_\_\_ to arrive Kona, Hawaii on (date) \_\_\_\_\_  
 and return on (Date) \_\_\_\_\_. *NOTE: For those wishing to extend to another island, flight segment  
 will be incorporated into your schedule. Please attach a separate letter to advise your planned itinerary.*

Airline Preference (if any) \_\_\_\_\_ Frequent Flyer # \_\_\_\_\_  
 Seating Preference: \_\_\_\_\_ Window \_\_\_\_\_ Aisle \_\_\_\_\_

**3. PAYMENT SUMMARY**

**HOTEL-The Four Seasons Hualalai** (if not providing credit card) # rooms \_\_\_\_\_ @ \$1800 each \$ \_\_\_\_\_

**OPTIONAL TOURS:**

**Mauna Kea Summit & Stars Adventure** \_\_\_\_\_ Monday, January 29 OR \_\_\_\_\_ Tuesday, January 30  
 # persons (must be 16 years or older) \_\_\_\_\_ @ \$200 \$ \_\_\_\_\_

**The following selections must be made in advance:**

Parka Size: # \_\_\_\_\_ M # \_\_\_\_\_ L # \_\_\_\_\_ XL

Dinner Entrée: # \_\_\_\_\_ Grilled Chicken # \_\_\_\_\_ Grilled Fish # \_\_\_\_\_ Vegetarian

**Whale Watch/Sunset Sail** Tuesday, January 30  
 #Adults \_\_\_\_\_ @ \$86.00 #Children (under 12) \_\_\_\_\_ @ \$75.00 \$ \_\_\_\_\_

**Golf Tournament** Tuesday, January 30  
 # Persons \_\_\_\_\_ @ \$205.00 (Charges to be billed to room account and rates subject to change)

**Circle Island Tour** Wednesday, January 31  
 # Adults \_\_\_\_\_ @ \$125.00 #Children (under 12) \_\_\_\_\_ @ \$114.00 \$ \_\_\_\_\_

**Morning Snorkel Cruise** Wednesday, January 31  
 #Adults \_\_\_\_\_ @ \$118.00 #Children (under 12) \_\_\_\_\_ @ \$107.00 \$ \_\_\_\_\_

**Hualalai Holoholo** Wednesday, January 31 #Persons \_\_\_\_\_ @ \$165.00 \$ \_\_\_\_\_

**Valley Waterfall** Thursday, February 1 # Persons \_\_\_\_\_ @ \$170.00 \$ \_\_\_\_\_

**Tennis Tournament** Thursday, February 1 #Persons \_\_\_\_\_ @ \$60.00 \$ \_\_\_\_\_

**TOTAL DUE** \$ \_\_\_\_\_

**Check is enclosed.** (Made payable to NYU/TPI)

**Credit Card** (Circle One): \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ American Express \_\_\_\_\_

\_\_\_\_\_ Guarantee hotel(s)\* \_\_\_\_\_ Charge for Optional Tours \_\_\_\_\_ Airline Tickets \_\_\_\_\_

Account Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

3 or 4 Digit Security Code: \_\_\_\_\_ Billing Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

*\*The hotel will charge the required deposit to the credit card above approximately 45 days prior to arrival.*

**I have read and understand the cancellation policies and penalties.** \_\_\_\_\_ (Initials Required)