

ADMISSION IS FREE
NEW YORK METRO
 MAY 1-3, 2015
 New Jersey Convention Center

Abilities
 EXPO

Hotel Information ★ Early Bird Specials

Distance to Convention Center

Hilton Garden Inn Edison Raritan Center
 50 Raritan Center Parkway

♿ (1.55)

King / Double-Double/ ADA. \$116.00
Additional Person Fee. \$10.00

Sheraton Edison Hotel Raritan Center
 125 Raritan Center Parkway

♿ (1.35)

King / Double-Double / ADA. \$156.00
Additional Person Fee. \$10.00

★ Early Bird Rate - \$146.00 through Feb 2, 2015

Sheraton offers shuttle service to Convention Center

Rates do not include current tax of 15% or any other applicable hotel fees (Subject to change without notice.)

Four easy ways to make your reservations:



<https://resweb.passkey.com/go/aeny2015>



(866) 364-9508 Toll Free
 (310) 590-4729 Local



(310) 649-3554



Par Avion Meetings & Conventions Abilities
 6033 W. Century Blvd., Ste 780, Los Angeles, CA 90045

Contact Information

Name: _____

Zip/Postal Code: _____

Company Name: _____

Phone: _____

Address: _____

Fax: _____

City: _____ State: _____

Email: _____

Individual Guest Booking

Guest Name: _____

Bed Type: ☐ King (max occ: 2) ☐ Double/Double

Arrival Date: _____ Departure Date: _____

☐ ADA King Roll-in Shower ☐ ADA D/D Roll-in Shower

☐ ADA Standard

Group Booking (up to 5 rooms)

Indicate the Bed type request and number of rooms required per night. For more than five rooms please contact our reservation department at (866) 364-9508 or (310) 590-4729.

Bed Type	Tue, April 28	Wed, April 29	Thu, April 30	Event Days Fri, May 1	Sat, May 2	Sun, May 3	Mon, May 4

All reservations must be guaranteed with major credit card or 1st night's deposit by check. Credit card information must be provided until check arrives. Check must be received by April 2, 2015. Room rates are on space available basis and do NOT include tax. **Last day to make reservations for the discounted rates is April 9, 2015. Last day for early bird rates is February 2, 2015.**

Card Type: ☐ American Express ☐ Diners Club ☐ Discover ☐ MasterCard ☐ Visa

Card Number: _____ Expiration Date: _____

Name on Card: _____ Signature: _____

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