

# International C.elegans Housing Form-(payment via Unviersity of California Recharge)

First Name \_\_\_\_\_ Gender \_\_\_\_\_

Last Name: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_

State & Postal \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Check-in Date: \_\_\_\_\_ Check-out Date: \_\_\_\_\_

Single or Double Occupancy: \_\_\_\_\_

*If Double list roommate name:*

\_\_\_\_\_

\_\_\_\_\_

Room Type (choose one)

\_\_\_\_\_ **Sunset Village - Courtside Collection (contains only 1 Queen Bed)**  
(\$152.00 - Single Occupancy/\$193.00 - Double Occupancy)

\_\_\_\_\_ **DeNeve or Sunset Village - Private Bath**  
(\$142.00 - Single Occupancy/\$183.00 - Double Occupancy)

\_\_\_\_\_ **Sunset Village - Semi-Private Bath**  
(\$132.00 - Single Occupancy/\$173.00 - Double Occupancy)

\_\_\_\_\_ **Rieber Court Residence Hall**  
(\$122.00 - Single Occupancy/\$153.00 - Double Occupancy)

*\*If you are sharing your room and choose double occupancy, your room rate would be 1/2 of the double occupancy rate listed above.*

Nightly Rate: \_\_\_\_\_ x Number of Nts: \_\_\_\_\_  Total Due: \_\_\_\_\_

University Recharge Information:

\_\_\_\_\_

University

\_\_\_\_\_

Department

\_\_\_\_\_

Full Accounting Recharge Number

Authorized Signer: \_\_\_\_\_

print name

\_\_\_\_\_

phone number

\_\_\_\_\_

Signature