



**GEMINI NORTH – HILO, HAWAII
OBSERVER/VISITOR SUPPORT PREPARATION FORM**

(Please submit at least 4 weeks prior to your scheduled run)

**Mail or fax to:
Gemini Observatory
Attn: Korey Halsch
670 N. A’ohoku Place, Hilo, HI 96720
Email: khalsch@gemini.edu
PH: 1-808-974-2536 or Fax: 1-808-974-2648**

Observer Name:	Date:
Institution:	E-Mail:
Mailing Address:	
Phone Number:	Fax Number:
Passport Number:	Issue Date:
Observing Allocation Code:	Program Title:
Principal Investigator:	

METHOD OF PAYMENT (for HP lodging):

Cash Check Credit Card (VISA or MC only)

Credit Card:	Number:	Expiration Date:
Driver’s License Number:	Issuer:	Expiration Date:

The following information is needed for your accommodations while in Hilo. If you plan on making your own hotel and car reservations, please provide the confirmation numbers. Our office in Hilo will handle lodging at Hale Pohaku on Mauna Kea.



BEFORE OBSERVING RUN REQUIREMENTS:

Arrival Date in Honolulu:	Airline/Flt. No.:		Time:
Hotel Accommodation in Honolulu*:	Confirmation No.:	In:	Out:
Arrival Date in Hilo:	Airline/Flt. No.:		Time:
Hotel Accommodation in Hilo Before Run*:	Confirmation No.:	In:	Out:
Rental Car Before Run*:	Pick Up Date:		Time:
Confirmation No.:	Return Date:		Time:

HALE POHAKU (HP) LODGING INFORMATION:

Date In:	Time:	First HP Meal:
Date Out: (checkout time is 2pm)	Time:	Last HP Meal:
Vegetarian Meals?	Smoking/Non-Smoking?	
Handicapped Room?	Other:	

AFTER OBSERVING RUN REQUIREMENTS:

Hotel Accommodation in Hilo After Run*:	Confirmation No.:	In:	Out:
Rental Car After Run*:	Pick up Date:	Time:	Confirmation No.:
	Return Date:	Time:	
Departure Date in Hilo:	Airline/Flt. No.:		Time:
Hotel Accommodation in Honolulu*:		In:	Out:
Departure Date in Honolulu:	Airline/Flt. No.:		Time:



VERY IMPORTANT:

Do you plan on using a laptop during your run? _____ Yes _____ No

If so, you must bring it to our Hilo office prior to your run so that we may evaluate your requirements in order to serve you better. Please indicate, the day and time we should expect you so we can plan accordingly. Date: _____ Time: _____

It is highly recommended that you have an anti-virus program installed on your computer and run a virus check not more than a day or two before your arrival. Proof of the virus scan will be requested during your orientation. If you chose not to do this before you arrive, we will do the installation for you and it may require a full day for the virus to complete.

Also, please indicate the operating system you require:

Windows _____ Unix _____ Linux _____ Mac _____ Other: _____

SPECIAL NEEDS OR COMMENTS:

SCIENCE TALK:

Title:
Short Abstract:
Possible Dates for Talk:

Cancellation policy: 24-hour notice or subject to charges.

If you have any questions, please call Korey Halsch at
1-808-974-2536 or Fax: 1-808 974-2648
Email: khalsch@gemini.edu