

Mark Wilson Conference February 10-13, 2012 Hotel Reservation Form

Last Name:	First Nar	me:
Street Address:		
City:	State:	Zip:
Country:	Phone:	
E-Mail Address:		
Arrival Date: February	y <u>, 2012</u> Departure Date : <u>Feb</u>	ruary , 2012
(Guests may reserve, availability at the time		ore and 3 days after the conference, based upon
# of Adults: _		
	Rooms are equipped with a king rs of age and above are allowe	
	are one-bedroom suites equipped ncy is 4 persons per room.	I with a king size bed and living room with queen sofa
Please check the typ	e of room you would like to re	serve and bed type if choosing the Marina Hotel:
_	Resort/Island View Room – Adult E Occupancy: \$209.00	Exclusive
	Island View Suite – Family Friendly Occupancy: \$239.00	y
	Ocean View Suite – Family Friendl Occupancy: \$269.00	y
Hotel room rates are po	er room, per night and are subjec	t to applicable taxes currently at 22.64%
Special Requests:		
		y to Guarantee Your Reservation. Your card will not be otel or if you incur one of the penalties listed below.
Type of Card: U	isa 🗌 Master Card 🗌 Diners	☐ American Express
Credit Card #	Exp. Date: _	_/
Credit Card holder Si	gnature:	
		of Mrs. Juanita Chirino, Reservations Manager. enaissance.com, Phone: 011 (297) 523 6166

NOTE: This form must be received on or before January 6, 2012 to guarantee a reservation. Cancellations made less than seven (7) days prior to check in are subject to a one (1) night penalty. Early departures without checking out are subject to one (1) night penalty.

A confirmation of your reservation will be emailed to you at the email address you entered above.