

RESERVATION REQUEST

Please use this form to make your Group Reservations

Reservations Fax #: 727 562-1222 or E-Mail: groupreservations@twresort.com

Group: Florida Health Sciences Library Meeting Date of Function: June 4 - June 7, 2003

☐ Hotel Roo	m \$133.00	☐ One Bedroom S	Suite, based upon availability \$173.00
	REQUESTS:	☐ Smoking	□ Non Smoking
A specific number of rooms are being held at this rate until: May 5, 2003. After this date, all group requests will be subject to rate/room type availability. Please make your reservation as soon as possible.			
Name		Organization/Firm	
Address			Phone Number
			Fax Number
City	State	Zip	
Arrival Date	Hour (Check-in 4:00 PM)		Departure Date (Check-out noon)
Number of People in Room	Sharing With		
A one night deposit by check or credit card is required. Check enclosed (Personal checks are not accepted for payment at checkout)			
Please charge to: Deposits will be billed on recei		□ Visa quest.	☐ American Express.
Card Number			Exp. Date
Name on Card			Signature

- All rooms are subject to applicable taxes unless attendee provides proof of tax exempt status prior to check-in.
- Group rates and availability for arrivals two days prior and departures two days after above group dates are on a space available basis only.
- Group rates may not be combined with any other special offer, package or discount.
- REFUNDS: Deposits are refunded provided your reservation is cancelled at least 48 hours prior to 4 PM on your arrival date. Please retain the cancellation number given.
- A nightly resort amenity fee (EVP/Parking) is included in rate. Non-overnight guests will be charged a parking rate of \$8.00 per day.

Return this form with deposit to:

TradeWinds Island Grand /Group Reservations Dept. PO Box 66307 St. Pete Beach, FL 33706 Group Reservations: (800) 808-9833 Fax: (727) 562-1222 E-Mail: groupreservations@twresort.com