MONTEGO BAY, JAMAICA
ALL-INCLUSIVE

HOLIDAY INN GROUP RESERVATION REQUEST FORM

WEST INDIAN LITERATURE CONFERENCE GROUP: OCTOBER 6-8, 2016

RESERVATION INFORMATION:

Group Name: *West Indian Literature Conference Group*

No. of Adults: _____

No. of Children (12 and under) ____ (Max. 2 kids per room free)

Arrival Date: _____

Flight #: _____

Arrival Time: _____am/pm

Departure Date: _____

Check-in Time: 3:00 pm; Check-out Time: 11:00 am

SPECIAL HOTEL RATE: Rates are quoted per night based on the All-inclusive plan. Room tax of US $4 per night additional will apply. Minimum length of stay: 2 nights.

Room Category	Single/ Double	Triple	Quad
Standard –Garden View Room	$192	$268	$344
Superior-Ocean View Room *(subject to availability)*	2043	$280	$356
Deluxe-Ocean Front Room *(subject to availability)*	$222	$298	$374
One Bedroom Suite-Ocean Front *(subject to availability)*	$346	$432	$517

NB: Maximum number of persons to each room is 4.

Room Type to Be Booked: _____

Special requests (this is based on availability):

Single (1 person) Double (2 persons, King))

Double/Double (2 beds, 2 persons)

Triple (King Bed with Sofa or Two beds)

Quad (King Bed with Sofa or Two beds)

Additional Requests: Please indicate below

_____

***RATES VALID FOR STAY DURING THE PERIOD: OCT 3-11, 2016.**

RESERVATION MUST BE MADE CONFIRMED AND GUARANTEED BY: SEPTEMBER 6, 2016.

**** Airport shuttle service is not included in the all-inclusive package. However, taxis are available at the arrival lounge at the Sangster's International Airport and the cost is approximately US$ 35 per trip one way. Note that additional charges may apply for extra baggage.**

GUEST NAMES AND CONTACT DETAILS

Ms. Mrs. Mr. Other_____

Full Name: _____

Full Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____

Country: _____ Zip Code: _____

Telephone: _____

Fax: _____ Email: _____

PAYMENT DETAILS:

All reservations must be guaranteed with a credit card and also for late arrival. The Holiday Inn SunSpree will provide confirmation within forty-eight (48) hours of receipt. Please note that one (1) night non-refundable deposit is required at the time of booking to guarantee reservation. Remaining nights will be collected at the time of check-in. **Original credit card must be presented at check-in. Please cancel by 6pm 7 days prior to 10-6-16 to avoid penalty charges.**

CREDIT CARD DETAILS:

American Express; Visa; Master Card; Discovery

Card Number: _____

Expiry Date: _____

Cardholder Name _____

Signature: _____ Date: _____

Complete and send by email to groups@hiresortjamaica.com to the Attention of Marjorie Clarke

Reservations in Jamaica: Toll Free 1-888-288-6006

Jamaica Office: 876-953-2485 – 6, reservations@hiresortjamaica.com

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