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### ITEX RESERVATION REQUEST FORM

ITEX forwards travel requests to participating member hotels. We are not a travel agency.

#### BOOKING INFORMATION

Name of Person Traveling: \_\_\_\_\_ Ph: \_\_\_\_\_ Fax: \_\_\_\_\_

Requested By: \_\_\_\_\_ Acct Name: \_\_\_\_\_ Acct#: \_\_\_\_\_

Destination: \_\_\_\_\_ City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Check-In Date: \_\_\_\_\_ Check Out Date: \_\_\_\_\_ #Adults: \_\_\_\_\_ # Children: \_\_\_\_\_ Ages: \_\_\_\_\_

Total Nights: \_\_\_\_\_ # Rooms: \_\_\_\_\_ Smoking Yes No Late Arrival Yes No

Bed configuration:  Queen  King  2 Double  Suite  Condo  Other (please specify below)

Special Requests: \_\_\_\_\_

#### CREDIT CARD INFO (This information is mandatory due to hotel requirements)

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

VISA  MasterCard  Discover  AMEX Exp. Date: \_\_\_\_\_ Card #: \_\_\_\_\_

Please review the above information as some of the following cash charges may be applied to your credit card. Your credit card is given to the hotel as a guarantee.

- **NO CANCELLATION CAN BE MADE ONCE THE RESERVATION IS CONFIRMED**
- All ITEX charges, ITEX dollars & cash are **NON-REFUNDABLE ONCE THE RESERVATION IS CONFIRMED**
- Taxes and incidentals are paid in cash at the hotel.
- Please note that reservation requests that are incomplete cannot be processed.

I have read the above conditions and I authorize this reservation request in my name. I understand and accept any applicable fees and charges that will be assessed to my credit card and my ITEX account. I authorize payment through ITEX as follows: Total ITEX: \$ \_\_\_\_\_ Total Tax: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Note: ITEX must have the credit card# and signature to begin the booking process)

#### RESERVATION CONFIRMED – To be filled out by ITEX only

Property: \_\_\_\_\_ Ph: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_

Rate/Night: \$ \_\_\_\_\_ Confirmation #: \_\_\_\_\_ Confirmed by: \_\_\_\_\_

Total ITEX: \$ \_\_\_\_\_ Total Tax: \$ \_\_\_\_\_ Authorization #: \_\_\_\_\_

Scrip Sent (date): \_\_\_\_\_ Address Sent to: \_\_\_\_\_ Sent by: \_\_\_\_\_