



**CARIBBEAN REGIONAL MEETING**  
**To follow up on Implementation of Mauritius Strategy**  
**October 5-7, 2005**

**HOTEL RESERVATIONS FORM**

<p><b>St. Kitts Marriot Resort &amp; Royal Beach Casino</b>  <b>858 Frigate Bay, St. Kitts, West Indies</b>  <b>Telephone: (869) 466-1200 Ext 7631</b>  <b>Fax: (869) 466- 2405</b></p>
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**To secure a room at the Special Group rate, you must make your hotel reservations on or before September 28, 2005. After this date, rooms will be assigned on a space and rate available basis.**

**RESERVATIONS PROCEDURE:**

**Please complete this form and return it to St. Kitts Marriott Resort Attention: Ms. Olivene Henry at Fax (869) 466-2405, email: [olivene.henry@marriotthotels.com](mailto:olivene.henry@marriotthotels.com) , or make your reservation by calling the property at telephone: (869) 466-1200 Extension 7631**

**PARTICIPANT INFORMATION:**

**Please complete a separate form for each participant.**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest Name(s): \_\_\_\_\_

Date and Time of arrival: \_\_\_\_\_ Flight No: \_\_\_\_\_

Date and time of departure: \_\_\_\_\_ Flight No: \_\_\_\_\_

**Room Preference:**

Standard room        { } US\$ 87.00 per night + 19% tax and service charge  
Deluxe room         { } US\$131.00 per night + 19% tax and service charge  
Pool View room     { } US\$149.00 per night + 19% tax and service charge  
Ocean View room    { } US\$184.00 per night + 19% tax and service charge  
One bedroom suite   { } US\$211.00 per night + 19% tax and service charge

{ } Single, { } Double

{ } Non smoking { } Smoking

Other, specify: \_\_\_\_\_

A credit card will be required for each individual attendee or payment for the first room night as initial deposit to guarantee room.

**Credit Card Information:**

{ } Visa { } Mastercard { } American Express { } Other \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date : \_\_\_\_\_

Name of Credit Card Holder \_\_\_\_\_

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