



Ministry of Economic Growth & Job Creation (October 09-13, 2017)

HOTEL BOOKING FORM

RESERVATION #	<i>To be completed by hotel staff</i>		BLOCK CODE: 170123MIN1	CUT OFF DATE SEPTEMBER 17, 2017
ARRIVAL DATE * <i>DD/MM/YY</i>	FLIGHT # <i>Flight #</i>	FLIGHT TIME* <i>HH/mm</i>	DEPARTURE DATE <i>DD/MM/YY</i>	DEPARTURE TIME * <i>HH/mm</i>
GUEST NAME (S) *	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Other <i>Print Primary Guest Name Here</i>			
SHARING WITH:	<i>Print Sharing Guest(s) Name (s) Here</i>			
# OF GUESTS *	ADULTS:	<i># of Adults</i>	CHILDREN:	<i># of Children</i>
Select room and bed type below by ticking the appropriate boxes	<u>ROOM TYPE</u>	<u>NIGHTLY RATE (US\$)</u>		
	ROOM TYPE/BED TYPE	SINGLE	DOUBLE	TRIPLE
		QUAD		
DELUXE JUNIOR SUITE KING <input type="checkbox"/>		171.39	196.69	221.99
Royal 1-Bed Room Suite <input type="checkbox"/>		239.70	239.70	265
		290.30		
<ul style="list-style-type: none"> Room/Bed types will be booked based on availability Check In Time 3:00 pm Check Out Time 12 noon 	Rates above are per room per night and are inclusive of: <ul style="list-style-type: none"> - Full buffet breakfast - Government Tax – 16.5% & Service Charge – 10% - Energy Surcharge – US\$8 & Special Room Tax - US\$ 4 Government Tax, Service Charge, Energy Surcharge, and Room tax are subject to change and may be increased without prior notice. Maximum capacity of bedrooms is 4 persons Children under 12 years sharing with an adult stay free. Maximum 1 child per room Additional US\$8.00 per child for breakfast (ages 6 – 12)			
CONTACT INFORMATION*	PHONE # <i>Print Phone # Here</i>		ADDRESS <i>Print Address Here</i>	
	FAX #			
	E-MAIL ADDRESS <i>Print E-Mail Address Here</i>			
CREDIT CARD GUARANTEE	TYPE*	CC NUMBER*		EXPIRY DATE**
	<i>Card Type</i>	<i>Print Credit Card # Here</i>		
CARD HOLDER NAME			SIGNATURE	
CANCELLATION POLICY	All reservations must be guaranteed with first night's deposit to credit card and guaranteed for late arrival. The Jamaica Pegasus Hotel will provide confirmation within seven days of receipt. . If cancellation is made less than 48 hours prior to arrival or "NO SHOW" then a charge equivalent to two nights room revenue will be assessed for each room cancelled. Guaranteed reservations are held until noon of the day following stated arrival date.			

PLEASE COMPLETE ALL SECTIONS & RETURN BY FAX: 876-929-0593 OR E-MAIL sales1@jamaicapegasus.com



TO: THE PEGASUS HOTEL

FROM: _____

RE: PAYMENT OF DEPOSIT BY CREDIT CARD FOR ACCOMMODATION

Ministry of Economic Growth & Job Creation

I, _____, am authorizing, the **PEGASUS HOTEL**

to charge my credit card, the amount of J\$/US\$ _____ which is the cost of the first night, for a booking from _____ to _____ for guest(s) _____.

If the guests are unable to make this trip, I will cancel at least seven (7) days prior to the arrival date so that I will not be charged a penalty.

Penalty for cancellation less than 2 days prior to Arrival: **Two (2) Nights Room Charge.**

CREDIT CARD TYPE: _____

CREDIT CARD NUMBER: _____

EXPIRY DATE: _____

CARDHOLDER'S NAME: _____

CARDHOLDER'S SIGNATURE: _____

CARDHOLDER'S TEL. CONTACT: _____

CARDHOLDER'S CITY: _____

CARDHOLDER'S E-MAIL ADDRESS: _____

Completed form and supporting documents requested must be scanned and returned via e-mail with a copy (front and back) of the card and identification. Accepted forms of ID are: Driver's License or Passport.

*Faxed copies of these documents will **NOT** be processed.*

Signature