



QUEBEC INTERNATIONAL BONSPIEL
January 28 to February 1st, 2017

ROOM RESERVATION FORM

NAME: _____ Team #: _____
 ADDRESS: _____
 CITY: _____ POSTAL CODE _____
 TEL: () - _____ FAX: () - _____
 EMAIL: _____
 CURLING CLUB / TEAM: _____

ROOM REQUESTED: _____ Single / Double Occupation \$ 169.00
 _____ Junior Suite (Limited number) \$ 319.00
 _____ Suite 1 or 2 rooms (Limited number) \$ 379.00
 _____ Small refrigerator (Limited number) 75.00\$

DEPOSIT: _____ \$ Master Card Visa American Express
 Autre : _____
 Card # _____ Exp. date: _____ / _____
MM YY

	Room number	Occupant/ sharing	Arrival/départure Dates	Number of nights	Confirmation number
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

NOTE : *The dates of departure are very important. Please note that you will be charged the number of nights indicated on your original request.*