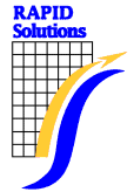




ACCOMMODATION REGISTRATION



Surname: _____

First name: _____

Company Name: _____

Telephone (W): _____

Telephone (AH): _____

Email: _____

Address: _____

Postcode/Zip _____

Number of persons requiring accommodation

_____ Adults _____ Children

*No charge if children are sharing with parents.
Max 2 adults/2 children per room using existing bedding

I/We shall be arriving on:-

 / / /
Day - Month - Year

Arrival time: _____

And departing on:- / / /

Day - Month - Year

PLEASE NOTE:

Check in time 2.00pm onwards
Check-out time 11.00am

Is card holder the registered guest? Yes No

(NO) I hereby authorize Conrad Jupiters to process and charge the following credit card for:

Accommodation only All charges (please tick)

(YES) This **guarantees** accommodation only.

No charge will be processed until check-in or late cancellation /or no show

B/card M/card Visa Amex Diners

Credit Card Number

Expiry _____ Cash

Cardholders Name: _____

Cardholders Signature: _____

Please note: Guests will need to leave an additional \$200 surety on arrival if paying by cash or a \$100 credit card authority.

A charge, equal to one night's accommodation will apply in the event of a non arrival or late cancellation. Reservations may be cancelled up to 24 hours prior to arrival.

CONFERENCE NAME: Rapid Solutions Risk Management Conference

CONFERENCE RATE: \$195.00 Room Only

I/We request the following bedding configuration:-

Single Smoking

Double Non smoking

Twin

*Preference for room type and non smoking are only a request basis and are not guaranteed

*Maximum 3 Adults per room. Triple share at additional charge of \$50.00 per night. If sharing please nominate the name of the person sharing.

Name: _____

Special requirements:

Confirmation booking number: (Hotel use only)

Return by Mail or Fax to:

Conrad Jupiters
PO Box 1515 Broadbeach Island
Broadbeach, Qld 4218, Australia
Telephone: 07 5592 8100
Facsimile: 07 5592 8219