

2017 Ivery Family Reunion Resort Stay Reservation form

All reservations must be made through the hosting committee

Call us at (754)-215-5981 or (754)-215-5982 or (754)-215-5984

Make your reservation as early as possible, certain room types are limited

If you decide to share a 2, 3 or 4 bedroom unit with other family members or friends, please only provide the name of the **MAIN CONTACT** person who is booking the room(s)

Room will be booked by: _____

Name of main room contact person

Room Type	Executive Studio	1 Bedroom Deluxe	2 Bedroom Deluxe	3 Bedroom Suite	4 Bedroom Suite
Price per day including taxes	\$120.00	\$169.00	\$240.00	\$370.00	\$500.00
Put an "X" for the room(s) type you are requesting					
Enter Number of Nights Staying					

Arrival / Check in Date: ____/____/____ Departure / Check out Date: ____/____/____

Check here if Handicap Accommodations are needed: Check here if payment(s) will be made via pay pal:

Payment must be made within 3 days of mailing this form. If payment is not received we CAN NOT hold your reservation

This is Resort not a hotel and requires that all room reservations be paid in full 90 prior to your check in date NO EXCEPTIONS.

Turn over for more Resort Room(s) Reservation information required

Also to give you a visual for each style of room, a floor plan is attached to assist you in making the appropriate selection to accommodate your family.

Please take advantage of our quick and convenient payment methods

1.) Square Online Store mtk.com/ifr-2017-orlando

2.) Our \$cashtag: \$IFR2017orlando

Add up the following Fees:

(Reunion fee, Shirt/Short Set, Resort Stay and Theme Park) divide into 8 equal payment.

Below is the payment due dates tracker.

Please mail this form in along with Reunion Registration Form with 1st payment)

October 1, 2015: _____

June 1, 2016: _____

February 1, 2017: _____

February 1, 2016: _____

August 1, 2016: _____

April 15, 2017: _____

April 1, 2016: _____

October 1, 2016: _____

For our traditional payment methods send Personal Check / Cashier's Check or Money Order Only:

Mail and Make all Payments payable to:

Veronica Watson

PO Box 694344 Miami, Florida 33269

Family Contact Full Name:	
Address:	
City, State, Zip:	
Telephone /Cell Phone Number:	
Email Address:	