



ITEX BROKERS' ASSOCIATION
REGIONAL MEETING REGISTRATION FORM
TRADEWINDS RESORT - TAMPA, FLORIDA

Name _____ Ph: _____ Fax: _____

Broker Code: _____ Acct#: _____

City: _____ State/Province: _____

Check-In Date: _____ Check Out Date: _____

Total Nights: _____ # Rooms: _____ Late Arrival (circle one) Yes No

Room Type: Std. Hotel Room Tropical View Hotel Room 1 Bedroom Suite

CREDIT CARD INFO (This information is mandatory due to hotel regulations)

Cardholder Name: _____

Signature: _____

VISA MasterCard Discover AMEX Exp. Date: _____ Card #: _____

Please review the above information as some of the following cash charges may be applied to your credit card. Your credit card is given to the hotel as a guarantee.

- **NO CANCELLATION CAN BE MADE ONCE THE RESERVATION IS CONFIRMED**
- All ITEX charges, trade & cash are **NON-REFUNDABLE ONCE THE RESERVATION IS CONFIRMED**
- Taxes and incidentals are paid in cash at the property
- Please note that reservation requests that are incomplete cannot be processed.

I have read the above conditions and I authorize this reservation request in my name. I understand and accept any applicable fees that will be charged to my credit card and/or my ITEX account as provided.

Signature: _____

Date: _____

(Note: ITEX must have the credit card# and signature to begin the booking process)
