

CHALET # ARRIVAL DATE DEPARTURE DATE **COMPANY NAME ADDRESS** POSTAL CODE PROV./STATE Residence **TELEPHONE** Business CLERK HST 105435812RT0001 ACCOMMODATION **BEDDING** 13% HST TOTAL BILL **PAYMENT DEPOSIT** BALANCE DUE SECURITY DEPOSIT COMMENTS: CHECK IN TIME IS AT 4:00 pm **CHECK OUT TIME IS AT 11:00 am** Please bring own bedding & towels if not ordered in advance.

Acknowledgment

| l, | acknowledge |
|---|---|
| that I will be occupying Char for the time commencing and ending | let NO. |
| against any damages to the my occupation, which sum of liquidated damages. I agree exceed the amount of my dofor all damages incurred dut to leave the chalet in a clear authorize Tyrolean Village R said deposit an amount suff | as a security deposit chalet which may occur during of money shall not construed as to pay for any damages which eposit. I accept responsibility ring my occupation and agree |
| Tyrolean Village Resorts Lim discretion, determine the vato the said chalet. | nited shall, in its absolute alue of any damages occurring |
| The balance of my deposit s inspection of the premises be Limited. | hall be returned to me after an by Tyrolean Village Resorts |
| · | ours, the Town of the Blue wide Noise Bylaw in effect and te noise that will disturb your |
| chalet. You may not have m the chalet than was agreed confirmation. Tyrolean Villa | people will be occupying your ore people staying or visiting upon in this reservation ge Resorts Limited reserves the o do not abide by the signed as a penalty charge the |
| Signature | |
| RESERVATION CONFIRMATION AND ADVANCE DEPOSIT RECEIPT | |
| Date | |

Tyrolean Village Resorts Limited
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NUMBER IN

GROUP

TYPE OF

CHALET