

GUEST REGISTRATION FORM

HOTELS & TOURIST ACCOMODATION ACT CHAPTER 285, REVISED EDITION 2011

PLEASE PRINT

(ONE GUEST REGISTRATION PER RENTAL SPACE)

* MANDATORY FIELDS

Disclaimer: Guest Registration Form fields are indicated with mandatory or optional requirements. For a form to be completed, all mandatory fields must be filled. The BTB does not use the information provided in optional fields such as personal data for any reporting, marketing or promotional purposes; however, it may be required by accommodation properties and are provided on a voluntary basis.

Accommodation name: _____

GUEST INFORMATION

1. Primary Guest Name: _____

Name) _____ *(Last Name) _____ (First Name) _____ (Middle)

2. Residential Address: _____

(Street Address)

*(City/Town/Village)

3. Phone Number: _____ *(State/Province/District)

(Zip Code)

*(Country)

4. Email: _____

5. *Number of Guests: _____ | _____

6. *Total Number of Guests: _____

(Adult)

(Children under 12)

7. *(Check-in Date: _____

8. *Check-out Date: _____

(DD/MM/YYYY)

(DD/MM/YYYY)

DOCUMENT INFORMATION

9. *Nationality: _____

10. Document Type: _____

11. Document Number: _____

12. Expiration Date: _____

(DD/MM/YYYY)

13. Country of Issue: _____

14. Guest's Signature: _____

ROOM INFORMATION (ACCOMODATION USE)

15. Rental Space Number: _____

20. *Average Daily Rate: _____

16. Invoice Number: _____

21. *Accommodation Charges: _____

17. *Nights of Stay: _____

22. * Accommodation Tax: _____

18. * Complimentary: YES | NO

23. *Less Tax Exempted: _____

19. Discounts offered: _____

24. *Total Charges: _____

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