

## Employee and Friends & Family Reservation Form To Book The Plaza Hotel

Employee Information				
Last Name		First Name		Employee #
Hotel / Condo Where Employed	Department	Day Phone #	Fax #	
Guest Information				
1. Last Name		First Name		Relationship to Employee
2. Last Name		First Name		Relationship to Employee
Reservation Details				
Hotel: The Plaza Hotel	# Adults	# Children / Ages	Arrival Date	Departure Date
Credit Card Information				
Name on Card	Card Type / Number (Example: VISA / 1234 5678 1234 5678)			Expiration Date

**Reservation Guidelines:**

1. Please refer to [www.outrigger.com/employeeerates](http://www.outrigger.com/employeeerates) for information about qualifying rates based on where you are employed
2. A maximum of 2 rooms per booking are allowed at Employee Rates or Friends & Family Rates
3. Room type will be recommended based on number of adults and children indicated
4. Maximum persons per room varies by room type. Extra person charges may apply.
5. If first and second hotel / condo choices are not available, an alternate will be recommended
6. If qualifying Employee Rates or Friends & Family Rates are not available, Best Available Rates will be offered
7. A maximum of 10 room nights per employee, per calendar year are allowed at qualifying Employee Rates or Friends & Family Rates
8. A reservation is guaranteed with a valid credit card of the employee or registered guest
9. A reservation or inquiries about room availability at these discounted rates cannot be made over the phone
10. A reservation can be made no earlier than 45 days prior to arrival date
11. **PLEASE FAX COMPLETED FORM TO 808-833-2349**
13. The form will be faxed back to you with a reservation confirmation number noted below
14. **PLEASE PRESENT THE APPROVED FORM AT CHECK-IN WITH VALID IDENTIFICATION**
15. Employee Rates and Friends & Family Rates will not be honored without a signed confirmation and ID
16. All room and incidental charges, taxes, and fees must be paid at check-out
17. Normal guest reservation and cancellation policies apply

I, the undersigned, agree to abide by the guidelines for family reservations set forth by Outrigger Hotels Hawaii. I understand that this benefit is a privilege which may be denied if guidelines are not followed.

Signatures / Approvals				
Employee Signature		Supervisor / Dept Head Signature		Date
Confirmation Information - For Reservation Department Use				
Approved:    Yes    No	Reason for Denial			Date
Reservation Confirmation #	Hotel	Rate per Night	Date	