



Kosher Mountain Retreats

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BY THE WERNER BROTHERS

Reservation form for The Fairmont Banff Springs Resort and Spa, Banff Alberta,

JULY 2nd — JULY 13th 2009

Name (First & Last) _____ Spouse _____

Address _____ Apt # _____

City _____ State _____ zip _____ E-mail _____

Phone numbers: HOME (_____) _____ Home fax (_____) _____

Office (_____) _____ Office fax (_____) _____

His cell (_____) _____ Her cell (_____) _____ HOW DID YOU HEAR ABOUT US? _____

Hotel Arrival date _____ Arrival time _____ AM PM (Please check one)

Hotel Departure date _____ Departure time _____ AM PM (Please check one)

Guest rooms: Fairmont Deluxe Deluxe Valley View Deluxe Premier Deluxe Premier Valley View

Suites: Signature Jr. Suite Executive Suite Executive Suite Valley View One Bedroom Suite

Two Bedroom Suite Two Bedroom Suite Valley View

Early Bird Option _____ Date ____/____/____

Number of guests: ADULTS 13 & UP _____ 9-12 _____ 2-8 _____ Under 2 _____ Total people in room _____

Names of children/adults in room

NAME _____ AGE ____ M F NAME _____ AGE ____ M F

NAME _____ AGE ____ M F NAME _____ AGE ____ M F

Day camp needed for _____ Children - Babysitting needed for up to _____ Children

CONNECTING ROOMS REQUIRED ROLL AWAY BED CRIB HIGH CHAIR BOOSTER BEDDING PREFERENCE _____

Minyanim: Ashkenaz Minyan (early minyan) Sefard Kohen Levi Yisroel

I would like to rent a car at the special rate offered by Kosher Mountain Retreats (KMR)
Please specify the size car you think you will need (Compact, Mid, Full, Premium, Luxury, Mini, Van, SUV, Other.) _____

I would like KMR to arrange our transportation to and from the hotel. Options are Limo Service – Cab – Shuttles

Special Instructions _____

Special Diet _____

Special Occasion _____ Date of Occasion _____

Travel Alert: All passengers including Canadian and U.S. citizens will be required to present a valid passport when traveling by air to and from Canada.

A required deposit of \$800 per person and \$500 per additional 3rd or 4th person in the same room will secure your reservation.

Please make checks payable to Kosher Mountain Retreats.

For deposit made with a credit card please complete below: Please note: most MasterCard's and Visa cards are subject to a 3% currency exchange fee while American express is 2.7%. Capital-one, does not charge a currency exchange fee.

I authorize Kosher Mountain Retreats to charge \$ _____ to my credit card listed below

Credit Card Type: _____ Credit Card Number: _____

Name on credit card: _____ Expiration Date: ____/____/____

Authorized Signature: _____

We look forward to welcoming you at the Fairmont Banff Springs Resort!

Our Mailing Address: KMR TOURS 403 Crown St. Brooklyn NY 11225

Toll-Free: 1888-567-0100 • Phone: 718-395-9040 • Fax: 718-504-7919 WWW.KMRTOURS.COM • Email KMRTOURS@aol.com