



Division: \_\_\_\_\_  
 Team: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Contact phone: \_\_\_\_\_  
 Tournament date: \_\_\_\_\_

Registration		#of Rooms	Kalahari
1	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
2	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
3	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
4	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
5	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
6	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children
7	Parents last name _____		Desert Queen
	Street address _____		Ryl African Queen Suite
	City, State Zip _____		
	credit card # _____ exp. _____		
(for office use) Confirmation # _____			# of adults
			# of children

Once the reservation is made on the teams behalf, any cancellations are handled through the hotels by the individuals. It is the individual parties responsibility for any incurred cancellation fees that may apply. Thank you.