Guest Permission Form



Owner Name:		
(First)	(Last)	
Dates of Reservation: Check - In:		
Check -Out:		
Unit Size		
Name of new guest:		
(First)	(Last)	
Address:		
Phone:		
Email:		
OWNERS PLEASE READ AND SIGN:		
*Guests will be denied if all your maintenance	e fees have not been paid i	n full.
*Guests have already been advised by the ownInitial (owner)	ner of the rules and policie	s of the resort.
*Your Guest will be responsible for any damag	ge to the unit/property	_Initial (owner).
If in the event your guest causes any damage t	to your property, and we ar	e not able to process the credit card they
provided, you as the owner would be charged a fees that you had to pay to the resort.	and it would then be your re	esponsibility to go after your renter for any
*Guests must provide a valid photo ID, be at le that will be held until the room is inspected by		
Signature of Owner:		
Date:		
Please email to: Reservations@tropicshoresre	esort.com	
OR		
Fax to: (386) 760 - 0279		