

QMath-8

RESERVATION FORM FOR HOTELS IN TAXCO

Name:

Last Name:

Address:

Tel.:

Fax:

E-Mail:

Arrival Date:

Departure Date:

Number of Nights:

Single       Double       Triple(if available)

Choice 1

Choice 2

Choice 3

I wish to pay deposit by       Credit Card       Bank Transfer

Please send by E-Mail,Fax or regular mail to the address below

Sra. María Eugenia Betancourt

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