

QUESTIONNAIRE

This questionnaire is for informational purposes only.

Name:	
Phone: email address:	
Unit Number: Interva	al Dates:
Unit Number: Interval Dates:	
We kindly request you do not exceed the occupancy limit of your unit. One bedroom sleeps 4 Two bedrooms sleeps 6 Three bedrooms sleeps 8	
My plans for the year are as follows: We will be using our time and the total number in our party will be:	
We have authorized our guests to use our time. (Only register a guest name if you will not be coming over) A guest letter will be sent to you for confirmation.	
Guest Names:	
I have or will deposit my time with RCI, by calling (800) 338-7777	
I have or will deposit my time with TRADING PLACES MAUI, by calling (800) 345-7301	
I have or will put my unit up for RENT with Aston Hotels & Resorts, by calling (808) 879-6321.	
I want assistance with my options, please contact me at:	
Phone:	
In case of an emergency while you are at the Maui Hill, please supply us with a name and number of a contact person:	
Emergency Contact Name:	
Telephone Number:	