

# Wyndham Reservation Request Form

## Preferred Property

- Travelodge
- Days Inn
- Ramada
- Super 8
- Howard Johnson
- Other

City\*

# Adults\*

Arrival Date\*

# Children (0-12)\*

Departure Date\*

# Children (13-17)\*

## Associate Information

First Name\*

Last Name\*

Street\*

City\*

Province\*

Postal Code\*

Country\*

Contact Phone\*

Email Address\*

Credit Card Number

Preferences

Smoking

King Size Bed

Non Smoking

Queen Size Bed

CVV

Expiry Date\*

Department Manager Signature\*

**WYNDHAM**  
HOTEL GROUP

