TRADE FORM

ROYAL PALM CLUB

J.E. IRAUSQUIN BLVD 79 NOORD, ARUBA

TEL: 011-297-526-3900 / FAX: 011-297-526-3995

EMAIL: ts.aru@riu.com

Name:	
RPC Contract Number (4 digit #):	
Week(s) Number (Fri. to Fri.) requesting to trade into (see calendar):	
Year requested week is to take place:	
Fixed Week: Unit Number:	
Special Notes:	
Please note: All Trades requests MUST be submitted on a Trade form. You may only trade within the sail requests are accepted one year in advance to the date of your fixed week/requested week. If the week you are trade is after your fixed week please submit accordingly. Once a Trade week is requested and confirmed, your automatically be cancelled. Please keep in mind, if we are unable to confirm your trade, you will remain in your trade, you will not be assigned until check-in.	e requesting to fixed week will
Please check one of the following options below for your Trade Request:	
I am only interested in having an apartment. If I cannot be accommodated for the week(s) that I a in an apartment, all payments will be refunded and I will be taken off of the list.	m requesting
I am interested in having an apartment but if there are none available I will take a run of the house house for the house house room usage counts as a regular usage week and the regular fees apply).	otel room.
Once a confirmation is issued, there is a \$50.00 Trade Fee. This fee must be received within 10 days or your Trade will be cancelled. Fees are payable by Credit Card Only faxed or emailed to the Riu.	of approval
By submitting this request, I understand that all Trades are based on availability and are on first contacted basis. This form states that "I intend to Trade my fixed week(s) for the week(s) I am requesting on this form a I will be contacted by email/fax. I also understand that before my request can be processed all maintenates and outstanding balances must be current. If fees are not current by the date of confirmation, trapermitted.	and if available, ince fees, late
Once you have read all of the above, please sign below which will confirm you have read, understood and ac information contained on this form.	knowledge the
Member Signature:	
Member Email:	
Member Phone Number:	

SEND TO FAX NUMBER 011-297-526-3995 Or SCAN & EMAIL ts.aru@riu.com

PAYMENT IS DUE ONLY WHEN CONFIRMATION IS ISSUED