

Supplier and Media Registration Form



Caribbean MARKETPLACE

January 18-20, 2009 | St. Lucia

Presented by the Caribbean Hotel & Tourism Association, American Express & Virgin Holidays

January 18, 19 and 20 | Gros Islet, St. Lucia

Caribbean Marketplace – The premier Tourism Marketplace for Buyers and Suppliers of Caribbean tourism products to meet in an organized, business-like environment.

Supplier registration is open only to fully paid-up CHTA Members with no outstanding fees to CHTA, CHARMS, CaribbeanTravel.Com - The Magazine and CHTA subsidiaries.* Supplier registration forms without payment will not be processed.

Supplier Participation at Caribbean Marketplace 2009 Requires the Purchase of a Booth.

Booth Options are as follows:

- Small Shared Booth measuring 6 feet wide and 8 feet deep. Cost: US\$610.00 per hotel, not including delegates. The 6' x 8' space is shared by two hotels. (available only to small hotels 75 rooms or less).
- Small Booth measuring 6 feet wide and 8 feet deep. Cost: US\$1,010.00, not including delegates.
- Large Booth measuring 8 feet wide and 8 feet deep. Cost: US\$1,910.00, not including delegates.
- Mega Booth measuring 10 feet wide and 8 feet deep. Cost: US\$2,210.00, not including delegates.
- **Supplier Delegate Fee:** US\$329.00 per delegate through September 26, 2008. Delegate fee changes to US\$429.00 after September 26, 2008. Payment must be received before the deadline to qualify for the early bird.

*For qualifying details of early registration and outstanding fees due to CHTA and/or its subsidiaries, please see the Registration Guidelines enclosed.

It is mandatory that any hotel represented by a Hotel Chain or a Hotel Representative Company must be a paid member of CHTA.

*See item 7 under Terms of Agreement on page 4.

Address block 1

Please use this address in the Official Electronic Directory for:

Communications Published information Both

Company/Organization Name: _____

Physical Address:* _____

City: _____ State: _____

Country: _____ Zip/Postal Code: _____

E-mail Address: _____

Web Page: _____

Telephone: _____ Fax: _____

(Please include country and city codes where applicable)

*No P.O. Box address if in the USA

Address block 2

Please use this address in the Official Electronic Directory for:

Communications Published information Both

Sales Office Address:* _____

City: _____ State: _____

Country: _____ Zip/Postal Code: _____

Telephone: _____ Fax: _____

Email Address: _____

(Please include country and city codes where applicable)

*No P.O. Box address if in the USA

Please complete and return this form by mail or fax to:

Caribbean Hotel & Tourism Association

Gables International Plaza
2655 Le Jeune Road, Suite 910
Coral Gables, FL 33134

Telephone: +1-305-443-3040

Facsimile: +1-305-443-3005

E-Mail: events@caribbeanhotelassociation.com

Address Block 1 is for the physical address of your property or company. **Address Block 2** is if you wish to use another address for the Official Electronic Delegate Directory listing, all event communications and confirmations. PLEASE PRINT CLEARLY.

If your company is a hotel chain or representative company, please see #7 on page 4.

Please fax your completed Registration Form to
+1-305-443-3005

or Register On The Web at
www.caribbeanhotelassociation.com

THE OFFICIAL CARD OF THE CARIBBEAN HOTEL ASSOCIATION



CARIBBEAN
HOTEL & TOURISM
ASSOCIATION



Supplier Registration Details

Delegates Attending Caribbean Marketplace

All correspondence will be sent to the attention of the Primary Delegate. Appointments are automatically scheduled for the Primary Delegate. Please check the appropriate box for appointment and non-appointment taking Delegates and also provide their email address for the delegates to receive any additional information. List additional delegates on a separate sheet.

1 Primary Delegate

First Name: _____
 Last Name: _____
 Title: _____
 E-mail: _____

2

First Name: _____
 Last Name: _____
 Title: _____
 E-mail: _____

Appt. Non-Appt.

3

First Name: _____
 Last Name: _____
 Title: _____
 E-mail: _____

Appt. Non-Appt.

Please indicate your booth type preferences and delegate registration fees below:

<input type="checkbox"/> Small Shared Booth The 6' x 8' space is shared by two small hotels.	_____ booth at US\$610.00 =	US \$ _____
<input type="checkbox"/> Small Booth	_____ booth at US\$1,010.00 =	US \$ _____
<input type="checkbox"/> Large Booth	_____ booth at US\$1,910.00 =	US \$ _____
<input type="checkbox"/> Mega Booth	_____ booth at US\$2,210.00 =	US \$ _____
<input type="checkbox"/> Supplier Delegate Fee (through September 26, 2008)	_____ delegates at US\$329.00 each =	US \$ _____
<input type="checkbox"/> Supplier Delegate Fee (after September 26, 2008)	_____ delegates at US\$429.00 each =	US \$ _____
<input type="checkbox"/> Contribution to the Caribbean Hotel & Tourism Association Education Foundation		US \$ _____
		Total US \$ _____

PAYMENT MUST ACCOMPANY REGISTRATION FORM. *Please make all checks payable in US funds and drawn on a US bank to: Caribbean Hotel & Tourism Association; or debit my credit card:

Check # _____ AMEX Other Type _____ Wire Transfer*

Please deduct my Membership dues from the credit card provided.

Cardholder Name _____

Cardholder number _____ Exp. date _____

Signature _____

Wire Transfer Originator _____ Route # _____

*To send your fees by wire transfer, please contact the Conferences & Events Department at
1-305-443-3040

*Note: Registrations without payment will not be approved. Please include registrant's name on check or wire transfer.



Supplier Marketing And Media Information For The Electronic Delegate Directory

The Electronic Delegate Directory contains important sales, services and facilities information about Buyers. Your answers to these questions are very important and will be used for your company profile, as well as the reference indexes in the Directory. **Please mark all answers that apply correctly.**

Special Booth Location Request: The Business Floor at Caribbean Marketplace is arranged geographically by country, according to your answer to Question D in the Marketing Information section below, unless otherwise indicated here. Request for special location must be indicated at the time of registration. Please place my booth in the following section of the Business Floor: _____

B. What are Your Company's Business Activities?

- | | |
|---|--|
| <input type="checkbox"/> 1 Accommodations | <input type="checkbox"/> 8 Hotel Association |
| <input type="checkbox"/> 2 Airline | <input type="checkbox"/> 9 Hotel Chain |
| <input type="checkbox"/> 3 Attraction | <input type="checkbox"/> 10 Hotel Management Company |
| <input type="checkbox"/> 4 Car Rental | <input type="checkbox"/> 11 Hotel Representative |
| <input type="checkbox"/> 5 Destination Management Company | <input type="checkbox"/> 12 Media Representative |
| <input type="checkbox"/> 6 Government Tourist Board | <input type="checkbox"/> 13 Promotion Board |
| <input type="checkbox"/> 7 Ground Operator | <input type="checkbox"/> 14 Other |

D. Where are Your Products/Services Located or Offered?

Your answers provided here are used for the Delegate Directory Location Index and your booth location on the Caribbean Marketplace Business floor.

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> 1 Anguilla | <input type="checkbox"/> 10 Cancún | <input type="checkbox"/> 19 Guyana | <input type="checkbox"/> 28 St. Lucia |
| <input type="checkbox"/> 2 Antigua & Barbuda | <input type="checkbox"/> 11 Cayman Islands | <input type="checkbox"/> 20 Haiti | <input type="checkbox"/> 29 St. Maarten, Saba |
| <input type="checkbox"/> 3 Aruba | <input type="checkbox"/> 12 Cozumel | <input type="checkbox"/> 21 Jamaica | <input type="checkbox"/> 30 St. Martin |
| <input type="checkbox"/> 4 Bahamas | <input type="checkbox"/> 13 Cuba | <input type="checkbox"/> 22 Martinique | <input type="checkbox"/> 31 St. Vincent & the Grenadines |
| <input type="checkbox"/> 5 Barbados | <input type="checkbox"/> 14 Curacao | <input type="checkbox"/> 23 Playa del Carmen | <input type="checkbox"/> 32 Suriname |
| <input type="checkbox"/> 6 Belize | <input type="checkbox"/> 15 Dominica | <input type="checkbox"/> 24 Puerto Rico | <input type="checkbox"/> 33 Trinidad |
| <input type="checkbox"/> 7 Bermuda | <input type="checkbox"/> 16 Dominican Republic | <input type="checkbox"/> 25 St. Barthelemy | <input type="checkbox"/> 34 Tobago |
| <input type="checkbox"/> 8 Bonaire | <input type="checkbox"/> 17 Grenada | <input type="checkbox"/> 26 St. Eustatius | <input type="checkbox"/> 35 Turks & Caicos Islands |
| <input type="checkbox"/> 9 British Virgin Islands | <input type="checkbox"/> 18 Guadeloupe | <input type="checkbox"/> 27 St. Kitts & Nevis | <input type="checkbox"/> 36 US Virgin Islands |

E. What is the Location of Your Property?

- | | | | |
|---------------------------------------|---------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> 1 Beachfront | <input type="checkbox"/> 3 Waterfront | <input type="checkbox"/> 5 Town | <input type="checkbox"/> 7 Close to Airport |
| <input type="checkbox"/> 2 Oceanview | <input type="checkbox"/> 4 Mountains | <input type="checkbox"/> 6 Rainforest | |

F. What Type of Services and Activities are Offered by Your Company?

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 1 Adventure Sports (Fishing, Scuba Diving, Sailing etc.) | <input type="checkbox"/> 11 Convention & Meeting Facilities | <input type="checkbox"/> 21 Incentive Programs | <input type="checkbox"/> 32 Multilingual Staff |
| <input type="checkbox"/> 2 Air Conditioning | <input type="checkbox"/> 12 Charters | <input type="checkbox"/> 22 Individual Travelers | <input type="checkbox"/> 33 Room Service |
| <input type="checkbox"/> 3 Air Ticketing | <input type="checkbox"/> 13 Ecological Tours | <input type="checkbox"/> 23 In Room Internet access | <input type="checkbox"/> 34 Sightseeing/Guided Tours |
| <input type="checkbox"/> 4 Airport Transfers | <input type="checkbox"/> 14 E-Mail Facilities | <input type="checkbox"/> 24 In Room Safes | <input type="checkbox"/> 35 Spa |
| <input type="checkbox"/> 5 Airport Welcomes | <input type="checkbox"/> 15 Exercise Facilities | <input type="checkbox"/> 25 In Room Telephone | <input type="checkbox"/> 36 Spa Treatments |
| <input type="checkbox"/> 6 All Inclusive Plan | <input type="checkbox"/> 16 Fax Service | <input type="checkbox"/> 26 In Room Television | <input type="checkbox"/> 37 Special Events |
| <input type="checkbox"/> 7 Banquets | <input type="checkbox"/> 17 Food & Beverage | <input type="checkbox"/> 27 Large Groups (over 250) | <input type="checkbox"/> 38 Student Tours |
| <input type="checkbox"/> 8 Business Center | <input type="checkbox"/> 18 Golf | <input type="checkbox"/> 28 Small-Medium Groups | <input type="checkbox"/> 39 Tennis |
| <input type="checkbox"/> 9 Car Rental | <input type="checkbox"/> 19 Handicapped Facilities | <input type="checkbox"/> 29 Leisure Groups | <input type="checkbox"/> 40 Translator Services |
| <input type="checkbox"/> 10 Children's Facilities | <input type="checkbox"/> 20 Historical & Educational Trips | <input type="checkbox"/> 30 Meal Plan Options | <input type="checkbox"/> 41 Watersports |
| | | <input type="checkbox"/> 31 Mini Bars | <input type="checkbox"/> 42 Weddings |
| | | | <input type="checkbox"/> 43 24-Hour Operations |

G. What Specific Marketing Services Do You Offer?

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> 1 Advertising | <input type="checkbox"/> 4 Fam Trips | <input type="checkbox"/> 7 Internet Communications | <input type="checkbox"/> 10 Sales Materials (Brochures, Visual Aids, Etc.) |
| <input type="checkbox"/> 2 Co-op Promotions | <input type="checkbox"/> 5 Group Discounts | <input type="checkbox"/> 8 Multiple Language Brochure | <input type="checkbox"/> 11 Satellite Conferencing |
| <input type="checkbox"/> 3 Customized Tours | <input type="checkbox"/> 6 International Sales Offices | <input type="checkbox"/> 9 Promotions | <input type="checkbox"/> 12 Travel & Industry Discounts |

H. What is Your Pricing/Market Position?

- 1 Economy 2 Moderate 3 Deluxe 4 Luxury

I. How Long has Your Company been in Operation?

- 1 0-3 Years 3 5-10 Years
 2 3-5 Years 4 Over 10 Years

Marketing Information As Submitted is Accurate As of this Date.

A. Please Provide Information About Your Company and Activities in the Greater Caribbean Region that is of Interest to Buyers:

(35 words or less - Print Only, CHTA will not be responsible for illegible information).

C. What Type of Accommodations Do You Offer?

- | | |
|---|---|
| <input type="checkbox"/> 1 All Inclusive | <input type="checkbox"/> 7 Medium Hotel (under 300 rooms) |
| <input type="checkbox"/> 2 Business Hotel | <input type="checkbox"/> 8 Small Hotel (under 75 rooms) |
| <input type="checkbox"/> 3 Condominium | <input type="checkbox"/> 9 Resort |
| <input type="checkbox"/> 4 Cottage | <input type="checkbox"/> 10 Spa |
| <input type="checkbox"/> 5 Ecotourism Property | <input type="checkbox"/> 11 Timeshare |
| <input type="checkbox"/> 6 Large Hotel (300+ rooms) | <input type="checkbox"/> 12 Villas |

5 Ecotourism Property

6 Large Hotel (300+ rooms)

19 Guyana

20 Haiti

21 Jamaica

22 Martinique

23 Playa del Carmen

24 Puerto Rico

25 St. Barthelemy

26 St. Eustatius

27 St. Kitts & Nevis

5 Town

6 Rainforest

21 Incentive Programs

22 Individual Travelers

23 In Room Internet access

24 In Room Safes

25 In Room Telephone

26 In Room Television

27 Large Groups (over 250)

28 Small-Medium Groups

29 Leisure Groups

30 Meal Plan Options

31 Mini Bars

7 Internet Communications

8 Multiple Language Brochure

9 Promotions

J. Describe Your Conference/Meeting Facilities:

1 Maximum Banquet Seating: _____

2 Largest Single Room Seating Capacity (Theatre Style): _____

3 Total Number of Breakout Rooms Available at one-time: _____

4 Exhibit Space (in square feet): _____

5 Largest Single Room Seating Capacity (Classroom Style): _____

6 Translation Facilities: Yes No

7 Video Conferencing: Yes No



Caribbean Marketplace 2009 Supplier Registration

General Information

Once CHTA is in receipt of your Caribbean Marketplace registration form, it is processed and a letter of receipt is sent to the primary delegate. If you do not hear from CHTA within 48 hours from the date of your transmission, please contact the Conferences & Events department at +1-305-443-3040 or email: events@caribbean-hotelassociation.com. A confirmation letter will be sent once we have completed the membership verification process and payment is collected.

Registration fees include: Listing in the Electronic Delegate Directory, Pre-scheduled appointments (if registration is received before December 12, 2008), two buffet lunches, Opening Cocktail Reception, buffet dinner and entertainment at the Caribbean Night and shuttle bus services between Host Hotels and Caribbean Marketplace venues.

Important Dates To Remember

September 26, 2008: Deadline to qualify for Early Registration Fee of US\$329.00 per Supplier Delegate. Payment must be received by this deadline to qualify for the early bird.

December 12, 2008: Appointment Request Form Deadline - the date by which all Appointment Request Forms must be received from registered Buyer and Supplier companies, to be included in the advance appointment scheduling.

December 12, 2008: Deadline to access the special hotel rates available to Caribbean Marketplace delegates.

January 18, 2009: Appointment Scheduling Sessions.

CHTA has arranged a number of special hotel rates in St. Lucia available exclusively for Caribbean Marketplace delegates. For a list of the host hotels and the reservation procedures, please visit www.caribbeanhotelassociation.com, click the Caribbean Marketplace logo and look for the Registration tab.

Delegates are responsible for making their hotel reservations arrangements.

Authorization – Terms of Agreement

All registrants are subject to the following terms and conditions:

1. All participation by any company or delegate must be approved by The Caribbean Hotel & Tourism Association (CHTA). CHTA reserves the right to approve all registrations prior to confirmation.
2. Cancellations are by written request only and apply to the policy in effect on the date the notification is received by CHTA. Cancellations must be received on or before December 1, 2008 and are refundable less a \$100.00 per person processing fee. After December 1, 2008, all registration fees and booth fees are non-refundable.
3. All social events hosted by any registrants during the program and any pre and post program fam trips sponsored by any registrant must be approved by CHTA and must not conflict with any official Marketplace business and social activities.
4. CHTA reserves the right to cancel any delegate's registration without cause at their discretion at any time prior to or during the Program. Delegates should refer to #5 of Registration Guidelines regarding misuse of Delegate badges and the ensuing penalties.
5. In the event of cancellation of the program, or any part thereof, because of civil discord, military action, natural event, or other "act of God" occurring without fault on the part of CHTA, there shall be no refund of fees paid or forgiveness of fees owed except at the discretion of CHTA.
6. CHTA shall not under any circumstances be liable for more than the refund of a delegate's registration fees upon cancellation of any delegate's participation or upon cancellation, in whole or part, of any Program for any reason. CHTA shall have no liability for consequential loss or damage of any kind arising out of any cancellation, and its total and maximum liability shall be limited to refund of registration fees.
7. Hotel Chains and Hotel Representative Companies may only represent CHTA member hotels in good financial standing. If your company is a Hotel Chain or Hotel Representative Company, you must register to represent all your Caribbean properties and each must be a fully paid member of CHTA. Selective presentation by a Chain or Hotel Representative Company is NOT allowed. Please list the properties represented: _____

8. Refunds will not be given for no-shows or any cancellation after the established deadline.
9. By registering, you agree to the terms and conditions for cancellations and refunds.

I have read the above and agree to the terms and conditions:

Name: _____ Date: _____

Title: _____

Signature _____

Please fax your completed Registration Form to
+1-305-443-3005

or Register On The Web at
www.caribbeanhotelassociation.com

For CHTA use only: BY DATE

Form Received: _____

Comments: _____

Supplier Approval: _____

