



USCG Rio Bayamon
Guest Housing
787 774-0298 ext 2118



Guest Housing Reservation Form

I understand that this reservation will be held for a period of forty-eight (48) hours, in which time I must confirm my reservation with a 50%, **non-refundable deposit**. I understand that the balance (minus the deposit) for the above mentioned unit must be paid, in full, upon arrival date of my guests. An inspection of the unit will be done at checkout and additional fees may be assessed for broken, missing items or excessive cleaning. Further, I hereby release the United States Coast Guard, and all their Officers, Agents, or Employees, acting officially or otherwise, from all liability that may arise from my family (and/or my guests) while residing on base.

Personnel on orders have priority over leisure reservations

Date: _____

Sponsor Name: _____ Rate/Rank: _____

Duty Station/Branch of Service: _____

Retired Branch of Service: _____

E-Mail: _____ Alternate E-Mail: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Unit size: ___ 2 Bdrm ___ 3 Bdrm ___ 4 Bdrm

Two nights minimum apply.

Check in date _____

Check out date _____

Guest Name: _____

Address: _____

Phone Number: _____

Vehicle Information (if a rental, pass information to gate guard)

Year: _____ Make: _____ Model: _____ Color: _____

License Plate #: _____ Rental Car: _____

Check In Date: _____ Check Out Date: _____

Check-In is after **3:00 PM.** Envelope with key will be left at RBH gate for you to pick up.

PRINTED NAME: _____

SIGNATURE: _____

Return this signed form to Emma.R.Rodriguez@uscg.mil