

Queens Condos Rentals & Sales by Connie, LLC

141 Swanson Avenue, Suite 1 & 2
Lake Havasu City, AZ 86403
928-505-3636



WINTER RESERVATION REQUEST

Name _____

Address _____

City _____ State _____ Zip _____

Phone: Home _____ Cell _____ Other _____

*E-Mail Address _____

*Arrival Date _____ Departure Date _____

**NOTE: To be fair to our winter visitors, requests are booked on a priority basis: 1st priority is length of stay. 2nd priority is based on the date your request is received.*

*If dates are changed AFTER you receive your confirmation letter, your date change will be viewed as a NEW request. This could result in your being **REASSIGNED OR PLACED ON A WAITING LIST.***

#of Tenants _____ Condo Requested _____ Floor Requested _____

City View _____ Lake View _____ Deluxe _____

Did you stay with us this year? _____ Which condo # _____ How long? _____

Are you flexible on your dates, pricing and / or location of condo? _____

Comments _____

Inquiry/Request Date: _____

Price Quoted: _____

Reservation Taken By: _____