

GEC Booking Request Form

Date: _____

Date of Check-in: (MM/DD/YY) _____ (check in time: 4pm)

Date of Check-out: (MM/DD/YY) _____ (check out time: 11am)

Last Name _____ **First Name** _____ **Gender** _

Home Address _____

Contact Email _____ **Phone No.** _____

Date of Birth _____ **Nationality** _____

Name & Number of emergency contact _____

Please select your location and room type.

GEC Viva (1311 Howe Street, Vancouver)	
Shared Apartment (Room type: _____)	Private Apartment (Room type: _____)
GEC Granville (718 Drake Street, Vancouver)	
Private Suite (Room type: _____)	_____
GEC Burnaby Heights (438 Gamma Avenue, Burnaby)	
Shared Apartment(Room type: _____)	Private Apartment (Room Type: _____)
GEC Pearson (7657 Cambie Street, Vancouver)	
Shared Apartment(Room type: _____)	Private Apartment (Room Type: _____)

*All tenants in private and shared bedrooms will share a kitchen and bathroom with other tenants.

How did you hear about us? _____

Name of your agency (if applicable) _____

Name of your school and program _____

Do you have medical conditions that we should be aware of? Yes No
If yes, please provide details . _____

Payment Method: The Resident can choose to make ONE time payment OR pay on a month-to- month basis. An initial deposit equal to 2 weeks' rent/50% of one month's rent depending on a location is required **by credit card** (processing fee not refundable) to secure the room and to serve as security for any potential damages. Your first month's rent is due one week prior to arrival. Your next payment will be due on the first day of the following month. Rent must be paid by Rent Moola or Cheque. Reservation will only be confirmed upon receipt of the deposit and administrative fee payment. Administrative fee is non-refundable.

Cancellation Policy: A refund will be processed if a written notice is received by us **at least 30 days prior to your arrival**, otherwise, no refund. If this involves a visa refusal, then we will issue a full refund.

Notes: _____