



2M CABO Spa Oasis Reservation Form

November 13th—18th, 2010

As a guest of 2M Company, Inc. you are entitled to a **15% discount off spa services**. To Pre Book Spa Treatments prior to departure please fill out the attached reservation sheet and fax or email to Susan Whittmeyer at 2M Company, Inc. Spa treatments may also be booked upon arrival directly with Spa Oasis

MOST POPULAR SPA TREATMENTS

SWEDISH MASSAGE

50 Minute / \$110.00 US 80 Minute / \$150.00 US

DEEP TISSUE MASSAGE

50 Minute / \$110.00 US 80 Minute / \$150.00 US

AROMATHERAPY MASSAGE

50 Minute / \$110.00 US 80 Minute / \$150.00 US

BAJA SACRED HOT STONE MASSAGE

50 Minute / \$110.00 US 80 Minute / \$150.00 US

MARINE DETOX FACIAL

50 Minute / \$110.00 US 80 Minute / \$150.00 US

OASIS SIGNATURE FACIAL

50 Minute / \$110.00 US 80 Minute / \$150.00 US

To view the entire Spa Oasis treatment catalog please click the link on our website www.2mco.com or visit www.hiltonloscabos.com

Spa Oasis Standard Terms and Conditions

1. Please inform spa 6 hours prior to your appointment time if you must cancel or reschedule. Full Spa treatment charges will apply after this time.
2. To ensure a pleasant spa experience you are requested to please arrive 15 minutes before your scheduled appointment. Refrain from wearing jewelry
3. **NO SHOWS** will be charged the full cost of treatment prior to discount.
4. Guests arriving late will receive treatment for the time remaining during their scheduled appointment, and will be responsible for full payment of the time slotted.
5. All services subject to a 17% gratuity & 11% Mexican sales tax in addition to prices listed.
6. All Prices and Treatments subject to change without notice
7. **PAYMENT GUARANTEE**—Spa Treatment charges will be billed to your individual room accounts - you are also welcome to settle all spa treatment charges with cash or credit card at end of treatment.

Please fill out one form per person—If you would like to request a couples massage, simply add 2nd name to this form:

Name: _____ Company Name: _____

Address: _____ City: _____ ST: _____ ZIP: _____

Daytime Phone: _____ Email: _____

SPA / SALON TREATMENT 1:

Name of Treatment: _____

Date Desired: _____ Time Preference: _____

SPA / SALON TREATMENT 2:

Name of Treatment: _____

Date Desired: _____ Time Preference: _____

**** Couples and in room massages are available please make notation if you would like to request either. Additional charges may apply ****

2M TERMS: All Spa/Salon Treatments & times will be reserved for you based on the above information. Any no shows/ cancellations charges will be your responsibility and charges will reflect on your individual room accounts. You will be notified with Spa Reservation details by email or mail and a copy of reservation will be included in your final 2M Travel Packet.

Please fax or email your Spa Registrations to: Susan Whittmeyer - 2M Company, Inc.

Fax: 406-259-7281 Email: swhittmeyer@2mco.com

Reservations must be received by: October 29th, 2010