

Embarc® Together Exchange Form

One exchange form per accommodation/week. To access the form for online authorization, click [here](#).

Member Information

FIRST NAME	LAST NAME		
ADDRESS	CITY	STATE	ZIP
HOME PHONE	WORK PHONE	FAX	
MEMBER #	E-MAIL		

Accommodation Authorization Information

The following resorts qualify for exchange: Interval International® or RCI® resorts. In addition, the manager of ExtraOrdinary Escapes reserves the right to accept or deny any exchange.

I authorize ExtraOrdinary Escapes to verify my accommodation/week information at:

RESORT NAME	RESORT CODE			
RESORT PHONE	RESORT FAX			
RESORT ADDRESS	RESORT CITY	STATE	ZIP	
<input type="checkbox"/> Interval International® AFFILIATION (CHECK ONE)	<input type="checkbox"/> RCI®	ARRIVAL DATE (MM/DD/YYYY)	DEPARTURE DATE (MM/DD/YYYY)	
<input type="checkbox"/> HIGH SEASON (CHECK ONE)	<input type="checkbox"/> MID	<input type="checkbox"/> LOW	ARRIVAL YEAR	CONFIRMATION NUMBER

Exchange forms should be submitted no less than 6 months and no more than two years from the arrival date.

ACCOMMODATION #	<input type="checkbox"/> Efficiency/Hotel	<input type="checkbox"/> 1 Bedroom	<input type="checkbox"/> 3 Bedroom
	<input type="checkbox"/> Studio	<input type="checkbox"/> 2 Bedroom	<input type="checkbox"/> 4 Bedroom
	ACCOMMODATION TYPE		

Print and Mail Authorization

Print and fax this form to 1.702.765.8722
or mail this form to:

Embarc® Together
c/o Diamond Resorts International®
Attn: Club Inventory Dept.
10600 West Charleston Boulevard
Las Vegas, Nevada 89135

My signature below indicates I am legally entitled to relinquish this week. I understand that all associated fees must be paid for the year I am depositing. Furthermore, I have not committed, nor will I commit, this accommodation for the use year indicated for any use other than ExtraOrdinary Escapes.

MEMBER(S) NAME(S)	
RESORT OWNER ID	DATE
MEMBER(S) SIGNATURE(S)	

