



## OWNER RESPONSE FORM

### ROYAL RESORT VACATION OWNERS' ASSOCIATION

I/we, the undersigned Owner(s) hereby declare my/our intention To Participate or Not Participate in the plan whereby Owners can exchange our deeded timeshare ownership for a fully paid membership with Vacation Internationale (the “**Transition Plan**”):

*Please Check The Option Noted Below That Applies to Your Ownership Plans:*

- \_\_\_\_\_ 1. I/we elect and agree **TO PARTICIPATE** in the Transition Plan, and accept all rights, privileges and obligations associated with becoming a Member of Vacation Internationale.
- A. By Participating I/we agree to execute a timeshare deed transferring title to my/our timeshare to the Hotel owner in exchange for the fully paid lifetime membership with Vacation Internationale.
- \_\_\_\_\_ 2. I/we elect **NOT TO PARTICIPATE** in the Transition Plan.
- A. I/we understand that by electing **NOT TO PARTICIPATE** in the Transition Plan, that my/our Ownership rights are now limited to use ONLY at the Royal Resort.
- B. I/we understand that RCI, Interval International and TPI exchanges no longer accept my Royal timeshare week deposits.
- C. I/we understand that the Association maintenance fees will increase in order to meet the expenses of operating the timeshare units.
- D. I/we understand there will be a special assessment required to complete the 2016 operational expenses.

\_\_\_\_\_ 3. I/we understand that I/we will be permitted to **NOT PARTICIAPTE** in the Transition Plan **AND NOT CONTINUE WITH MY/OUR OWNERSHIP AT THE ROYAL.**

A. I/we agree that I/we will sign the necessary deed transferring my/our ownership to the Hotel Owner

B. I/we understand that by deeding my/our timeshare ownership to the Hotel owner that I will no longer be responsible to pay Royal maintenance fees.

**C. I/we understand that by deeding our timeshare to the Hotel owner that the Association will forgive any and all fees we may owe.**

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Co-Owner Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner and Co-Owner Phone Number(s)

\_\_\_\_\_  
Owner and Co-Owner Email Address(es)

- Please return this form in the accompanying return envelope at your earliest opportunity.
- This form may also be returned by scanning it and emailing it to [DroAdmin@tradingplaces.com](mailto:DroAdmin@tradingplaces.com).
- This form may also be returned by fax to (949) 315-3753