



HOTEL BOOKING FORM
8TH MIDDLE EAST CEMENTRADE
(22.10.2013-24.10.2013)
e-mail: h8973-re@accor.com
Phone: +90 216 333 00 00

NAME : _____

ADDRESS: _____

CITY: _____ PROV/STATE _____

ZIP/POSTAL CODE: _____ COUNTRY: _____

PHONE NO(with area code) _____ FAX: _____

E-MAIL: _____

(note: This information will be used to mail or fax an acknowledgement of your reservation)

SENT CONFIRMATION BY: FAX

E-MAIL:

PASSPORT NUMBER: _____ DATE OF BIRTH: _____

PLEASE RESERVE:

Single Standard Room

EURO 100.00/per night(included breakfast and VAT %8)

Double Standard Room

EURO 120.00/per night(included breakfast and VAT %8)

Single Superior Room

EURO 120.00/per night(included breakfast and VAT %8)

Double Superior Room

EURO 140.00/per night(included breakfast and VAT %8)

CANCELLATION POLICY: The reservation has to be made until 10th of October, 2013. Please note that cancellation or date modifications will be accepted until the date of 10th of October, 2013, after this date there will be no-show charge of full nights stay to be applied.

- All children under 6 years stay free of charge when using existing bedding.
- All children from 7 to 12 years are charged EUR 35 + 8 % VAT per night when using existing bedding.
- All older children or adults are charged EUR 30.- per night per person for extra beds.

ARRIVAL DATE: _____

DEPARTURE DATE: _____

STAYING A TOTAL OF _____ NIGHTS.

TYPE AND CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

CARD HOLDER'S NAME: _____

SIGNATURE

DATE