

CMT delegates who wish to make direct booking with Labadi Beach Hotel can do so by giving the following details:

a de	BOOKING REFERENCE: CMT3RD2015 (They must quote this code)				
•	BOOKING REFERENCE.	CIVITSNB2015 (They must quote this dode)			
•	NAME OF GUEST: (please add title)				
•	TELEPHONE NUMBER:				
•	EMAIL ADDRESS:				
•	OCCUPANCY: underline Superior Rooms Luxury Rooms Superior Suite Executive Suite Presidential Suite	(Single Occupancy: \$330.00 / Double occupancy \$370.00 (Single Occupancy: \$370.00 / Double occupancy \$400.00 (Single/Double Occupancy: \$800.00) (Single/Double Occupancy: \$1,400.00) (Single/Double Occupancy: \$2,500.00)			
•	ARRIVAL DATE:				
•	DEPARTURE DATE:				
•	AIRPORT TRANSFER:	Yes/No (Give flight details if YES)			
•	PAYMENT MODE:	(We accept American Express, Visa, Master Cards, Bank Transfer or Cash)			
•	BOOKED BY				
<b>√</b>	Attached is a Credit Car	ed Authorisation Form and our USD Bank Account Details			



	CREDIT CARD AUTHORISATION FORM Date:  , hereby authorize The Labadi Beach Hotel to debit			
my credit card with the amount of \$, being the amount required for the settlement of my hotel bill.  Confirmation Number:				
I will be settling the account for the following set. Room Only Bed & Breakfast Full Account Pre Arrival Shopping Expenses Other Billing Instructions My Card Details are as follows:	ervices;	1		
Card Type	\$			
Card Holder's Name	i			
Card Holder's ID Number				
Card Holder's Telephone Number	:			
Card Holder's Business Address	ŝ			
Card Holder's Home Address	\$			
Card Account Number	•			
CVC No. (Last 3 digits on back of card)				
Expiry Date	:			
Authorized Signature	•13 •03 •13			
Once completed please return by <b>fax</b> to (+233) 21 773100 or <b>email</b> ( <u>labadi@legacyhotels.co.za</u> ) together with a copy of the front & back of the credit card and the Signatory's I D.				
Direct Bank Deposit: Hotel Investments (Ghana) Limited, Acc No. 87015/022457/00, Standard Chartered Bank Ghana				