



## NOVOTEL ISTANBUL MAIL ORDER FORM

### A) Reservation details:

Company / Group Name : CMT CENTER OF MANAGEMENT TECHNOLOGY  
Events Dates : 24-26 November 2010  
Number of Room : 10  
Room Rate ( Single) : **EURO 90.-**

### B) Payment Type:

- Only Room Charge                       Room & Breakfast Charges  
 All Expenses                               Other (Please indicate)

**The balance, EURO 1.120.- (EURO one thousand one hundred twenty )**

### C) Credit Card Details:

Credit Card Number :

Expired Date :

Security Number :

Invoice Address:

**In order to process mail order application, both side copy (front and back side) of the credit card and the card holder's ID must be sent to Novotel Istanbul.**

**I accept that above indicated hotel expenses of our guest in Novotel Istanbul can be charged to my credit card.**

**Card Holder's Name & Surname :**

**Card Holder' Signature :**

**Date :**