

**HOTEL RESERVATION FORM**  
**SANS/280914/CONF**

**28<sup>th</sup> September – 12<sup>th</sup> October 2014**

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Credit Card Details for guarantee of reservation - OBLIGATORY:**

CC Number: \_\_\_\_\_ Expiry: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Time: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_

***Please Mark With -***

Single Room - € 110, - per night, incl. BB and VAT -

Double Room - € 120, - per night, incl. BB and VAT -

- Non Smoking     - Smoking     - Twin     - King-size bed

➤ Please send this form latest by **28/08/14** otherwise we can not guarantee the room availability.

➤ Cancellation Policy: Your reservation is guaranteed by your Credit card. In case of cancellation till **29/08/14** no charge will be applied. In case of cancellation between **29/08/14 to 14/09/14**– we will charge the first night to your CC. After **14/09/14**– we will charge the whole stay. The same policy will be applied in the case of No Show.

**Contact person:** Jana Jelinkova, Reservations

**Phone Number:** 00420 296 882 351 **Fax Number:** 00420 296 889 998

**Email:** reservation07@andelshotel.com

**Web:** [www.angelohotel.com](http://www.angelohotel.com)

Guest Signature: \_\_\_\_\_

**HOTEL CONFIRMATION:**

Confirmation Number: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_