### **NOVOTEL WARSZAWA CENTRUM BOOKING FORM**

|  |
| --- |
| **FOR HOPE REPRESENTATIVES** |

**BOOKING DEADLINE 20 APRIL 2015**

**Completed and signed form, to be returned within the deadline to Mrs Barbara Tołkacz**

**barbara.tolkacz@cartis.pl**

**Single standard room breakfast and taxes included – 270 PLN / 65 EUR**

**DBL/Twin standard room breakfast and taxes included – 302,40 PLN / 75 EUR**

Novotel guarantees the above rates upon availability

Room rates apply to one room/night, breakfast buffet,
internet access in the room and access to the hotel wellness centre included.

The reservation will only be valid by returning this form, dully filled out and signed.

The reservation for hotel stay which is made will be effective when the confirmation for such
reservation is sent by e-mail.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **First name** |  |
| **Organisation** |  |
| **Address** |  |
| **Postcode** |  | **City** |  |
| **Country** |  | **Email** |  |
| **Phone** | + | **Mobile** | + |
| **Date of arrival** |  | **Date of departure** |  |
| **Room type - please indicate single or double** |  |
| **FOR THE BOOKING OF A DOUBLE ROOM, please indicate the name of the person who accompanies you** |  |
| **Credit card type** |  | **Exp. Date** |  |
| **Credit card number** |  |
| **Name of the credit card owner****In the event of a no show your credit card will be charged for the first night accommodation** |  |

***Reservation guaranteed by credit card. By signing this form I agree with the terms of reservation***

Date

Signature Signature of the credit card owner

 (if different from the registered person)