

GGI conference GmbH
Reference number: 353 452
Dates: 16 – 18/11/2012

Reply from _____
First name _____ Last name _____

Phone _____

Email _____

Hotel Century Old Town, Prague

Fax number +420 266 000 247 or email address: Prague.reservation05@accor.com
Please return this confirmation by 16th October 2012 at the latest. Thank you.

I will require hotel accommodation from _____ to _____.

Nr.of nights _____

Single room 80 EUR/per night/including VAT and breakfast

Double room 85 EUR/per night/including VAT and breakfast

Twin room – 2 separate beds 85 EUR/per night/including VAT and breakfast

I prefer smoking room/non smoking room

Guarantee policy:

Credit card type _____ Credit card expiration _____

Credit card number _____

Guarantee by credit card is mandatory, otherwise the reservation will not be confirmed.

Payment policy: directly in the hotel upon arrival or departure
Cancellation of the booking until 10 days before arrival: no charge
Cancellation 9 days before arrival – the day of arrival: charge in full for the total turn over

Remarks _____

(Signature)