

HOTEL RESERVATION FORM

SMi 14.-16.5.2017 (2 nights) Resevation number: 8916

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 Superior Room - € 129,00 per night, incl. Breakfast and VAT - □	
Double Superior Room - € 139,00 per night, incl. Breakfast and VAT - □	
☐ - Twin ☐ - Kingsize bed	
Please send this form latest by 14.4.2017 otherwise we cannot guarantee the room availability.	
<u>Cancellation Policy:</u> Your reservation is guaranteed by your Credit card. In case of cancellation till 30 days no charge will be applied. In case of cancellation between 29-15 days we will charge the first night to your CC. From 14 days we will charge the whole stay. The whole stay will be charged in case of No Show.	
Contact person: Jana Jelinkova, Reservation department Phone Number: 00420 296 353 404 Fax Number: 00420 296 889 998 Email: jana.jelinkova@viennahouse.com Web: www.andelshotel.com	
Guest Signature:	
HOTEL CONFIRMATION:	
Confirmation Number:	
Date: Signature:	