



KRAKÓW
CENTRUM

Hotel Reservation Form of NATO MEETING 17-20 February 2009

Please complete this form in block letters using blue or black pen. Reservations must be made before 20th January 2009 to take advantage of this specially negotiated rate. Reservations received after 20th January will be confirmed upon availability at public rates

1. GENERAL INFORMATION

Title:	First name:	Billing address:
Last Name:	Country:	State/Province:
Job Title:	City:	Zip/Postal code:
Company:	Street:	
E-mail:	Tel:	Fax:

2. HOTEL RESERVATION

ARRIVAL date:	DEPARTURE date:	Arrival TIME:
Check-in: 14:00 hrs	Check-out: 12:00 hrs noon	

Please tick accordingly, which room type you would like to book (*please note that this is subject to availability)

Room type:	Rate:	Smoking: YES / NO
<input type="checkbox"/> STANDARD room for 1 person	389 PLN/room/night	
<input type="checkbox"/> STANDARD room for 2 persons	447 PLN/room/night	
<input type="checkbox"/> EXECUTIVE room for 1 person	454 PLN/room/night	
<input type="checkbox"/> EXECUTIVE room for 2 persons	512 PLN/room/night	

Room rates include breakfast, 7% VAT tax and use of swimming pool, sauna, Jacuzzi and Beauty Corner.

3. METHOD OF PAYMENT

All reservations must be guaranteed with a credit card (with valid expiry date). Bookings without credit card information or without an authorization signature will not be accepted. Copy of credit card (both sides) is obligatory to confirm reservation

Please guarantee my room reservation with credit card as follows:

Visa Eurocard/MasterCard American Express Dinners

Card number:	Expiry date:
Name of cardholder:	Signature:

4. CANCELLATION CONDITIONS

Hotel reserves the right to charge a cancellation fee equivalent to one night's rate for all reservation cancelled between 21st January and 2nd February. Reservations cancelled 3rd February or after that day or in case of no-show are subject to a cancellation fee equivalent to the room charge of the entire stay.

In case of cancellation I authorize Novotel Krakow Centrum to charge penalty to my credit card.

Signature: _____

An extra supplement will apply for:

Late check-out until 18:00 – 50% discount on the daily rate	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Late check-out after 18:00 – Full rate will apply	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Any cancellations or modifications must be confirmed in writing.

Please fax this application form back by latest 16 January 2009

Novotel Kraków Centrum

Ul. Tadeusza Kościuszki 5
30-105 Kraków, Polska

Tel.: +48-12-299-29-29

Fax: +48-12-299-29-99

E-mail: H3372-re@accor.com

Hotel confirmation number:	Confirmed by:	Date:
----------------------------	---------------	-------