



KRAKOW CENTRUM
Hotel Reservation Form of NATO MEETING
Krakow/Poland 17-20 February 2009 (period concerned)

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 rate.

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 / IBIS KRAKOW CENTRUM

Arrival:	Departure:	Number of nights:
Check-in: 14:00 hours	Check-out: 12:00 hours noon	
Please tick accordingly, which room type you would like to book (* please note that this is subject to availability)		
Room type:	Rate:	<input type="checkbox"/> Smoking
<input type="checkbox"/> Standard double room for single use:	258 PLN/ room/night	
<input type="checkbox"/> Standard double (twin) room for 2 persons	299 PLN /room/night	

Room rates include tax, buffet Breakfast, as well as the use of swimming pool, jacuzzi & sauna at Novotel Krakow Centrum.

3. METHOD OF PAYMENT

All reservations must be guaranteed with a major credit card (with valid expiry date). Bookings without credit card information or without an authorization signature below will not be accepted. Copy of credit card (both sides) is obligatory to confirm reservation. Please guarantee my room reservation with the credit card as follows:

<input type="checkbox"/> Visa	<input type="checkbox"/> Eurocard /MasterCard	<input type="checkbox"/> American Express
Card number:	Expiry date:	
Name of cardholder:	Signature:	

4. CANCELLATION BY DELEGATES

Hotel reserves the right to charge a cancellation fee equivalent to one night's room rate for all reservations cancelled between 21st of January and February 2nd. 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 Ibis Krakow Centrum to charge the 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: 19 JANUARY 2009

Ibis Krakow Centrum Hotel
Syrokomli Street 2, 30-105 Krakow, Poland
Contact person: Katarzyna Leszczynska

Tel.: +48-12-2993300 Fax: +48-12-2993333 E-mail: h3710@accor.com

Hotel confirmation number:	Confirmed by:	Date:
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