



HOTEL BOOKING FORM

DGINS 2017 Conference

Budapest, HUNGARY

To make a reservation at **NOVOTEL BUDAPEST CITY****** please return this form not later than **20.08.2017** to the below mentioned contact.

After the booking deadline the hotel offer accommodation upon availability.

For hotel details please, visit the following web page: <http://www.novotel.com/gb/hotel-0511-novotel-budapest-city/index.shtml>

Please complete one form per room:

First name: _____ Last name: _____

Address: _____

Phone _____ Fax _____ E-mail: _____

Room category and rate:

Single: (EUR 109) Double: *) (EUR 120) Prices per room per night/including breakfast

Please note that the offered rates include the buffet breakfast but exclude 18% VAT and 4% local tax.

*) I share the room with: _____

Arrival Date: _____ Departure Date: _____ No. of Nights: _____

Credit Card Company: _____ Number: _____ Exp. Date: _____

Card Holders Name: _____

Date

Authorised Signature

Please note the reservations need to be guaranteed by credit card or deposit sent to the hotel against its pro forma invoice.

BOOKING / PAYMENT INFORMATION

1. On receipt of your reservation form your booking will be reconfirmed.
2. In case of no-show or late cancellation total cost of the stay will be charged as penalty.
3. Cancellation deadline for the reservation is **7 days** prior to arrival.
4. Check-in time: **from 2 PM, check-out: until 10 AM.**

Please e-mail or fax this form to Hotel Novotel BUDAPEST CITY:

Fax: +36 1 466 56 36

Email: h0511-re2@accor.com