

## Reservation Form

## **Europa Royale Bucharest\*\*\*\* Hotel**

## 13th European Conference of the Electoral Management Bodies

Group name: 13th European Confe	rence of the Electoral I	∕lanagement B	odies
Guest name 1: Guest name 2:			
Arrival Date:	Date: Depart		te:
FOR PARTICIPANTS:	Standard Room:		
Single use: 68 EURO / night	Double use:	78 EURO / ni	ght
☐ Single use (1 person / room) ☐ □	Oouble use (2 persons,	1 bed / room)	☐ <b>Twin use</b> (2 beds / room)
The rates are per room, per night and amount of the accommodation excludin			exclude city tax of 1% of the total
Please complete all areas below an (both sides). Incomplete requests 1 14th of March 2016, to ensure account	nay be rejected. This eptance of the credit	form must be card to be cha	e received until arged.
All reservations must be guaranteed.	. Accepted Credit Cards	: American Expi	ress, Visa and MasterCard
Credit Card:	Number:		Expiry Date:
Card holder's name:	CVC:		_ Signature:
Payment: The hotel will preauthoriz failure to comply with this method of pattern-services are going to be paid at the Preferences:	ayment, reservation is c		
Special Request: Smoking Additional Special Requests: Estimated Time of Arrival:	□Non – Smoł	king	☐Handicap Accessible
<b>Option date:</b> Mentioned special rates a hotel by email <a href="mailto:sales.bucharest@euro">sales.bucharest@euro</a> Any requests received after this date w day.	paroyale.com or fax:	+40 372 37 65	00 until 14th of March 2016.
Cancellation Policy: If the cancellation charges will be required. In case of no-s			
PLEASE COMPLETE AND S sales.bucharest@europa			
Guest Contact details for confirmation Email: Pho	: ne:	Fax:	Date:
RECONFIRMATION BY HOTEL Confirmation Number: Signature:			Date: Stamp:

THANK YOU FOR CHOOSING EUROPA ROYALE BUCHAREST HOTEL!

