HOTEL BOOKING FORM



Hotel	ART'OTEL BUDAPEST 1011 Budapest, Bem rakpart	16-19.	From			
То	Group Reservations					
Phone	(+36-1) 487-9411 or 487-9406		Phone			
Fax	(+36-1) 487-9488 or 487-9405		Fax			
E-mail	budapest@artotels.com		Date			
Ref	VALUE Meeting 22-26 November, 2015		Pages			
We would	d like to reserve a room fo	r our guest(s) at	your hotel as follo	ows:		
Name		Arrival	Departure	Room type & rates		
		date	date	Single	Double / twin	Danube-view
				85,-€	95,-€	Suppl. +10 €
Hungarian SPECIAL R	vell as free WI-FI access thre forint at the Hotel's daily ex EQUESTS: □ garage (please guarantee the booki	change rate. 16,- € / day)	□ other			
Type of credit cardnumber:expiry date:						
CANCELLATION POLICY: The hotel accepts cancellations until 6 pm the day before arrival Please note that in case of late cancellation or no show by the guest, one night charge will be applied to your credit card. REMARK:						
HOTEL C We'd lil Please no	CONFIRMATION Ke to ask you to sen ote, that late reservations	d your reser will be subject t	vation till late			
	CONFIRMATION (filled glad to confirm the above		Your reservatio	n number is	<u> </u>	
Date	Confirmed by					