HOTEL RESERVATION FORM
FUTURESOURCE CONSULTING
10th & 11th November 2008

Please fax or e-mail the completed form to Eurostars Grand Marina Hotel
For the Attention of: SALIM ISLER Email : convenciones@grandmarinahotel.com
Fax: 00 34 93 603 9090 Phone : 00 34 93 603 9000

Name of delegate: _____

Company: _____

Address: _____

Telephone: _____ Fax: _____

Passport Details: Number:_____ Expiry date _____

Date of Issue _____ Place of Issue_____

Would like to book a: Double room single occupancy ☐
Double room double occupancy ☐

Rate: 230€ per room per night Breakfast included for 1 person
Rooms & breakfast prices subject to 7% VAT.

Arrival date: _____ Arrival time: _____

Departure date: _____ Departure time:_____

PAYMENT CONDITIONS

Type of Credit card: _____ (Visa, Amex, Diners, Mastercard)

Card number: _____ Expiry date: _____

Cardholder's name: _____

Note:
All reservations must be guaranteed by credit card – **please attach a copy of both sides of your credit card**

Cancellation policy:

- Any cancellation should be made in writing.
- The whole stay is to be charged as cancellation fee for cancellations received less than 29 days prior to arrival date (11.10.2008).
- In case of a no-show the whole stay is to be charged to the above mentioned credit card

Guaranteed by:

Name:

Cardholder signature:

Date: