# Qubit conference, belgrade Reservation form

**Metropol Palace Belgrade** is looking forward to welcoming you in period **February 5 – February 8, 2019** in Belgrade. Please use this form to make booking in Metropol Palace Belgrade for mentioned event. Should you require a room outside the dates, booking will be accepted subject to availability at the best rate available at that time.

The cut-off date is **January 8, 2019.** All reservations received after **January 8, 2019** willbe accepted subject to availability at the best available rate at that time. Number of rooms at these promotional rates is limited. To book your room, please return completed form to our reservation department on e-mail:

reservations@metropolpalace.com

After submitting the form, you may expect writing conformation from reservation department.

# Room type (please tick):

ROOM TYPE RATE (Single/double occupancy)

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| --- |
| [ ]  Superior room EUR 90/105* **Rates are** **per night, per room including buffet breakfast, VAT (10%), internet access (Wi-Fi and LAN), parking and**

**access to Hotel Fitness and Spa center Limegrove (swimming pool, sauna, steam bath, jacuzzi, relax room, gym).*** **Rates do not include city tax (EUR 1.30 /RSD 155 per person, per night).**
* **Note that VAT and tourist tax are defined by local legislation and subject to change.**
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Special request: Smoking/Non Smoking:

(Please note that the Hotel will give its outmost to accommodate special requests but may not guarantee it. Special requests will be confirmed based on availability at the time of booking.)

# GUEST DETAILS

Guest name:                                Position/Title:

Company:                                     Address:

City:                      Post Code:                      Country:

Telephone:                           Fax:                           e-mail:

# Arrival & Departure

Arrival Date:                                Departure Date:

(Check-In Time from 14:00) (Check-Out Time until 12:00 noon)

# PAYMENT

[ ]  By cash or credit card, at the hotel: Kindly note that cash payments at the hotel may be done only in local currency (RSD)

[ ]  Bank transfer: Kindly provide us with invoicing details. Full prepayment is required prior arrival date.

[ ]  3rd party credit card: Kindly fill in bellow form and send it to hotel mail/fax.

# reservation guarantee

**No reservations will be confirmed, nor guaranteed unless credit card details are provided**.

Credit card details (credit card details will be used as reservation guaranteeCredit card type/name:

Credit card number:

Expiration date:

Card holder name:

Signature of card holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this I guarantee the above booking to this credit card and accept the terms of cancellation below

# cancelation policy

• If an individual guest cancels the accommodation reserved up to 14 days prior to arrival, then no cancellation charges will apply. If an individual guest cancels the accommodation reserved between the 14th day and the 8th day prior to the date of arrival, a cancellation charge of 50% of the cancelled accommodation booked by the individual guest will apply. This charge will be due to the Hotel by the individual guest/s.

•   If the individual guest cancels the accommodation reserved within the 7th day before the individual guest’s arrival or does not show up (No Show) on the day of arrival or in case of early departure the individual guest will be charged 100% of the cancelled accommodation. This charge will be due to the Hotel by the individual guest/s. In the event of force majeure (i.e. natural disaster, strike, war, epidemic, death, disease, closing airports or railway/bus stations or any other unforeseen circumstances) preventing the guest(s) from arriving, the Client shall not be charged NO SHOW.

# Credit Card Authorization Form (in case that the third party will cover ANY HOTEL services ON BEHALF OF the guest)

I,                 (card holder’s name) authorize “Metropol Palace” hotel to apply the marked charge(s) mentioned below for the following guest to my credit card:

I hereby authorize the following charges to be applied:

[ ]  Room & tax only

[ ]  All charges

[ ]  Guest incidentals only

[ ]  Other:

Total amount to be charged in Euros:

Credit Card details:

Credit Card Number:

Expiration Date:

Printed name on the card:

Billing details:

Company Name:

Address:

City, State, Zip:

Date:

Authorized Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_