

# HOTEL REGISTRATION FORM

## Understanding IFRS 17

# Booking Reference: 398.079

The Hotel Registration form shall be submitted before **11/09/2017** by fax or email to the **Hotel Tivoli Oriente**.

### **Accommodation**

Arrival Date: \_\_\_\_\_ Departure: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Fax : \_\_\_\_\_ Phone : \_\_\_\_\_ e-mail: \_\_\_\_\_

### **Room Type:**

Single ( ) **€ 125,00** Double ( ) **€ 135,00**

(These rates are per room, per night, including Buffet Breakfast. Excluding city taxes)

### **Reservation Guarantee : Credit Card**

VISA ( ) MASTER CARD ( ) AMERICAN EXPRESS ( ) OTHER'S ( )

Credit card number: \_\_\_\_\_ Expiry date : \_\_\_\_\_

Security Code: \_\_\_\_\_

Signature : \_\_\_\_\_ Date : \_\_\_\_\_

**FREE CANCELATION WILL BE ACCEPTED UP TO 14 DAYS PRIOR TO ARRIVAL  
LESS THAN FOURTEEN DAYS PRIOR TO THE PLANNED ARRIVAL, ANY CANCELLATION WILL BE CHARGED AT FULL PRICE  
IN CASE OF NO-SHOW, WE WILL CHARGE THE ALL STAY ON THE CREDIT CARD.**

### **SUBMIT REGISTRATION TO:**

JOANA GOMES – Groups and Events Coordinator

**Tel: 351 218 915 334**

**Fax: 351 21 891 5427**

**e-mail – joana.gomes@tivolihotels.com**