

Accommodation Booking Form

WPMC 2019 - 24th to 27^h NOVEMBER 2018

Please complete this form until **23rd October 2019** and send it to our Hotel by e- mail
conf.entrecampos@viphotels.com

Guest Information:

Prefix (Prof/ Dr/ Mr/ Mrs/ Ms) _____ Last Name _____ First Name _____
 Passport nº _____ Issue Date _____ Expire Date _____
 Address _____
 ZIP Code _____ City _____ Country _____ Tel. _____
 Fax _____ Mobile _____ Email _____
 Company / Organization (if applicable) _____
 Number of people that shares your bedroom _____

Reservation Details*:

Arrival Date: ___/___/___ Departure Date: ___/___/___ N° Nights: ___

Type of Room*: Single (72 €) ___
 Double (82 €) ___

The above accommodation rates are inclusive of breakfast and legal taxes.
 City Tax not included.

Special Requirements: _____

1 -Credit Card Details:

| | | | | | | |
|--|-----------------------------------|----|------|-----------|------------|-------------|
| Name as it appears on the credit card: | | | | | | |
| Card type: | Visa | MC | Amex | Diners/CB | Discover | JCB |
| Account type: | Individual (personal credit card) | | | | | |
| ____/____/____ | Corporate Company Name: | | | | | |
| Card number: | | | | | Exp. Date: | |
| Cardholder's Signature: | | | | | | Security nº |

2 -Bank Account details:

Name: PORTAS A - P IMOBILIARIA, S.A.

NIB: 0036.0065.99100051971.87

IBAN: PT50.0036.0065.99100051971.87

BIC/SWIFT: MPIOPTPL

Please send us copy of the payment by e-mail.

***Reservations and cancellation policy:**

- a) The reservation should be received before **23rd October 2019**
- b) **With reservation we will charge the amount of the first night – Non refundable**
- c) Cancellations from **20th November 2019**: 100% of the total bedroom price will be charged into individual's credit card.
- d) All no-shows will be charged to your credit card for all room nights booked.

Date ____/____/____

Signature _____