**RESERVATION FORM**

Please put „X” In dark places

|  |  |
| --- | --- |
|  | Single room with breakfast in rate 220 PLN/night  |
|  | Double room with breakfast in rate 240 PLN/night  |
| Full name |  |
| Full name #2 |  |
| Email address |  |
| Mobile phone |  |
| Check-in date |  | Check-out date |  |
| Invoice Data | Company name: |  |
| Address: |  |
| City: |  |
| VAT No (if necessary) |  |
| Requests / Remarks | If the participant or participants extend the hotel day without the consent of the Hotel Management until 12.00 on the day of departure, the Hotel will charge the participant the amount of PLN 200.00 net for each room occupied. |
|  | Please guarantee my booking by **credit card**  vISA  MASTERCARD  ………………  |
| CC Number |  | Expiry date: |  |
| Full name on card |  | Signature |  |
|  | Please send me pro forma invoice to prepay my whole reservation |

* Check-in: 2 PM; Check-out 12 PM
* Parking is free of charge for conference/banquet attendees in dates: 05.12-07.12.2019
* Smoking is forbidden in entire hotel.
* Hotel guarantees availability of rooms in rates above until 15.11.2019
* Reservation can be cancelled free of charge until 15.11.2019
* Completed form should be sent at: **recepcja@krakowexpress.pl**
* **Any information about the hotel is available at** [**www.bestwesternkrakow.pl**](http://www.bestwesternkrakow.pl)
* **Reservations after 15.11.2019 will be made on rates : 240PLN per Single room with breakfast/260PLN per Double room with breakfast**