

## Accommodation Booking Form

**Conferência TWEPP 2015 - LIP**  
 27<sup>th</sup> September – 2<sup>nd</sup> October

**Please complete this form and send it to our Hotel by mail, until 5<sup>th</sup> August, to:**  
[comercial.viplisboa@viphotels.com](mailto:comercial.viplisboa@viphotels.com),

**Guest Information:**

Prefix (Prof/ Dr/ Mr/ Mrs/ Ms) \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Passport n° \_\_\_\_\_ Issue Date \_\_\_\_\_ Expire Date \_\_\_\_\_  
 Address \_\_\_\_\_  
 ZIP Code \_\_\_\_\_ City \_\_\_\_\_ Country \_\_\_\_\_ Tel. \_\_\_\_\_  
 Fax \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_  
 Company / Organization (if applicable) \_\_\_\_\_

**Reservation Details\*:**

Arrival Date: \_\_\_/\_\_\_/\_\_\_ Departure Date: \_\_\_/\_\_\_/\_\_\_ N° Nights: \_\_\_

Type of Room\*:            Single (92 €) \_\_\_\_\_            Smoking \_\_\_\_\_ Non-Smoking \_\_\_\_\_  
    Double (102 €) \_\_\_\_\_

The above accommodation rates are inclusive of breakfast and legal taxes.

Special Requirements: \_\_\_\_\_

**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:	
<b>Cardholder's Signature:</b>						Security nr°

**\*Reservations and cancellation policy:**

- Upon reservation request, Hotel will charge the 1<sup>st</sup> night in the credit card given by the client, as guarantee of reservation. NOT Refundable in case of cancellation
- Remaining nights will be paid upon check in

Date \_\_\_/\_\_\_/\_\_\_\_

Signature \_\_\_\_\_