

### HOTEL BOOKING FORM

Please complete and fax or e-mail to Radisson Blu Hotel, Nice,

Direct line: + 33 4 97 17 70 76 - Fax: ++ 33 4 97 17 70 75 Email: coline.casini@radissonblu.com

First Name:	Last Name
Adress	
Country	
E Mail	
Telephone	
Arrival date & time	
Departure date&time (<noon)	

#### 1. ACCOMODATION

<b>Room type:</b>	
<input type="checkbox"/> Single CITY view room : 160EUR*	<input type="checkbox"/> Single SEA view room : 210EUR*
<input type="checkbox"/> Double Occupancy CITY view room : 180EUR*	<input type="checkbox"/> Double Occupancy SEA view room : 230EUR*

\*City tax: 1.50EUR per person and per day / VAT included / Breakfast included.

#### Accommodation Cancellation Policy

- We will charge one night on the indicated credit card on reception of this booking form as a guarantee
- In case of cancellation between the booking day and August 22<sup>nd</sup>, one night will be charged as a penalty.
- In case of cancellation from August 23<sup>rd</sup>, full stay will be charged as a penalty.

#### 2. FOOD AND BEVERAGE (Please find attached the presentation for you lunches and dinners. If you wish to benefit of those special rates please tick the boxes below )

Food Package:	Monday 24.06	Tuesday 25.06	Wedn 26.06	Thurs 27.06	Friday 28.06
<b>FOOD Package</b> (Buffet Lunch with drinks at 40euros )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>FOOD Package</b> (3plates diner at 48euros with drinks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

#### F&B Cancellation Policy

- In case of cancellation between the booking day and September 13th, there will be no cancellation fees.
- In case of cancellation from September 14th, you'll be charged 100% of the amount booked as a penalty.

#### **CONFIRMATION**

To receive an hotel confirmation, each participant must fill in their credit card details, which is the only way to guarantee the room. The booking will become definitive upon receipt of this information:

☐ Mastercard ☐ Amexco ☐ Visa ☐ Diners

Cardholder: \_\_\_\_\_

Credit card number:                 Expiry date:

Mandatory: CVC code at the back of the credit card (3 last digits):

**DATE:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

**SIGNATURE OF THE CARD HOLDER IF NOT THE SAME:** \_\_\_\_\_

By signing this form, I authorize Radisson BLU to charge my credit card in case of no show or cancellation according to the above mentioned cancellation conditions.