

FAX

● ΤΜΗΜΑ ΚΡΑΤΗΣΕΩΝ
RESERVATIONS DEPARTMENT

● ΠΡΟΣ / TO
Mrs Katerina MARAVELI
H0866@accor.com
Tel : +30 210 82 00 700
Fax : +30 210 82 00 777

● ΑΠΟ / FROM

ΗΜΕΡΟΜΗΝΙΑ / DATE :

Αρ. Σελίδων / No of pages :

CC :

● ΘΕΜΑ / SUBJECT : OVERNIGHT ACCOMMODATION BOOKING FORM

Dear Mrs Maraveli,

With this e-mail would like to confirm my participation to the **IARIA/VICOV CONFERENCE** and to authorise you to charge my credit card accordingly to my stay as follows:

Guest name:

Room type:

Single room : **109 €** (including taxes & breakfast)

Double room: **119 €** (including taxes & breakfast)

The above rates do not include the accommodation tax (3 euro per realized room night) which will be imposed from January 1st, 2018, according to the law 4389/2016.

Arrival date:

Departure date:

Credit card number: expiration:

Credit card holder:

Cancellation terms & conditions:

1. For any change or cancellation of the reservation 7 days prior arrival, one day cancellation fees will be applied to the credit card.
2. For any change or cancellation of the reservation 3 days prior arrival, 100% cancellation fees will be invoiced to the credit card.

Approved and authorized by :

Name:

Signature :

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