

## MICE & FORUM INSIDE Forum Corporativo Sevilla

PERSONAL DETAILS (Please write print clearly)															
□ Mr □ Mrs □ Ms □ Prof □ Dr															
Last Name First Name															
E-mail (mandatory)															
													T		
Address															
													$\top$		
Postcode City				Countr	/										
												Т	$\top$		_
Phone (Place include international diallier codes)		Fax											 		_
(Please include international dialling codes)															
ACCOMMODATION															
HOTEL		DL	II Sing	gle Use		Dou	ble/T	win Ro	oom						
Catalonia Giralda 4* (Cjón Sierra Nevada 3 - 41003 - SEVILLA)			€	,		85									
Above rates are per room and night, including breakfast and 10 $\!\%$ VAT.															
Check-in date Check-out date	No o	f nigh	·+c			D	oom	Typ				٦			
Check-iii date Check-out date	No. of		ILS	+-	1			тур	_						
30_/01/2024		1		-		Sing Dou									
Approximate time Approximate time							n (2 s	enar	rate	d be	eds)				
							(				,	_			
Remarks / special requests:															
PAYMENT (In euros only)															
□ Credit Card															
I, the undersignedauthorise HOTELES CATALON							reafte	er.							
(No payment in advance is required, but the authorization of the credit card guarantees accommodation)  □ American Express □ Visa/MasterCard															
No° Exp.	Date														
Card Verification Code (CVC): Cardholder's signature: 3 digits for Visa on the back															
of the Visa Card or 4 digits for AMEX															
CONDITIONS, PAYMENT AND CANCELLATION P	OLICY	/													
Deadline for requesting hotel booking and price is 09/01/2024. We will of the control of th	do our bes	st to be	of serv	rice to v	ou afte	er this	deadli	ne as w	vell						
<ul> <li>Payment must be made directly to the hotel. The credit card number yo</li> </ul>															
<ul> <li>Cancellations before 28/1/2024 will not have any charge</li> <li>Cancellations from the 28/1/2024 onward will be charged full stay as a company</li> </ul>	cancellati	on fee.													
For No Shows the total amount of nights will be charged															
By signing this form, I accept the above conditions															
Date Signature															
Send to:															
													7		
Catalonia Giralda 4*															
Booking Department giralda.reservas@cataloniahotels.com															
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