HOTEL ZAGREB

Damira Tomljanovića Gavrana 5, Zagreb
www.hotelzagreb.com.hr

Days of Oris 2013

reservation form

SURNAME: …… **NAME:** ……..

COMPANY / ORGANISATION : ……
……
ADDRESS: ……
……
CITY: ……**POSTAL CODE:** …… **COUNTRY:** ……
TELEPHONE: ……**MOBILE:** …… **FAX:** ……
EMAIL: ……

ARRIVAL DATE: ..... **DEPARTURE DATE:** ……

APPROXIMATIVE ARRIVAL TIME: ……

TOTAL NIGHTS REQUIRED: ……..
TYPE OF ROOM REQUESTED:

Single room	**EUR 33,00 per room and per night**
Double room	**EUR 40,00 per room and per night**

Smoking □ **Non-smoking** □

Breakfast buffet included – VAT included – City tax: EUR 1 per person and per day not included
Accounts are payable in HRK according to daily exchange rate of the Croatian National Bank
Check-in time: after 2 PM - Check-out time: noon

In order to confirm accommodation at special group rate please supply your credit card details:

CREDIT CARD TYPE: ……

CREDIT CARD NUMBER: ……

EXPIRY DATE: ……**CARD HOLDER:** ……

CANCELLATION POLICY: Reservations guaranteed by credit card can be cancelled up to 4 PM on the arrival day at no charge. In case of a no-show, the International Hotel will charge 1 overnight to the credit card provided.

PLEASE RETURN THIS FORM via fax ONLY. FAX +385 1 4892 060. All resevations after 11th October, 2013 are subject to availability and the Hotels reserve right to change the accommodation rate.

GUEST SIGNATURE: …… **DATE:** ……