



PALÁCIO ESTORIL HOTEL, GOLF & SPA
ACCOMMODATION BOOKING FORM

O I D P CONFERENCE

Return by fax to - +351 214648159 or e-mail us on – teresa.neves@hotelestorilpalacio.pt

Title, Mr, Mrs _____
 First Name _____
 Family Name _____
 Address:
 Street _____
 City _____
 Area/State _____
 Country _____
 Tel.: _____
 Fax: _____
 E-mail: _____

Please reserve _____ room(s) as ticked below:
 Arrival date ____/07/2013 Flight Number _____ Arrival Time _____
 Departure date ____/07/2013 Flight Number _____ Departure Time _____

	Room categories	Rates for OIDP Conference
<input type="checkbox"/>	Single room for single occupancy	€150,00
<input type="checkbox"/>	<input type="checkbox"/> Non-smoking / <input type="checkbox"/> Smoking <input type="checkbox"/>	
<input type="checkbox"/>	Double room / Twin room for double occupancy	€150,00
<input type="checkbox"/>	<input type="checkbox"/> Non-smoking / <input type="checkbox"/> Smoking <input type="checkbox"/>	

Prices are in Euros, per room, per night and including all taxes and buffet breakfast in the main restaurant.

Reservations are subject to availability of the group's room block, until 30th April 2013.

Cancellation Policy:

Until 7 days prior to arrival – reductions and cancellations can be made with no charges. Reductions and cancellations made after this date are subject to a minimum charge, of the amount equivalent to one night stay.
 No shows will be charge in full

Please charge my VISA / MasterCard / Eurocard (please underline)

Card no:

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Security code:

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Expired date:

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I agree to the above Cancellation Policy

Name and address of **card holder** if different from above:

Name _____

Date ____ / ____ / ____

Signature of card holder _____