



## *EARA CONFERENCE*

*2<sup>nd</sup> to the 5<sup>th</sup> September 2020*

Please return this registration form before the 1st May/2020 to [marta.pinto@infantesagres.com](mailto:marta.pinto@infantesagres.com)

### **Personal Information**

Mr  Mrs

First name : \_\_\_\_\_ Last name : \_\_\_\_\_

Second Guest Name (if applicable): \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Contact number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Special requests: \_\_\_\_\_

Passport/Identification details

Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Issue date: \_\_\_\_\_ Expiry date: \_\_\_\_\_

### **Reservation**

#### **Special Room Rates**

Superior Single Room: € 234,00 per room/night w/ breakfast included

Superior Double/Twin Room: € 247,00 per room/night w/ breakfast included

From 01.03.2018 a city tax of 2€ per person / night is charged (a maximum of 14€ per person), not included in the total price and has to be paid at the hotel. This tax applies to guests aged 13 and over.

Please inform estimated time of Arrival: \_\_\_\_\_

#### **Cancellations and No-Show Policy**

Cancellations without penalty: until 1st May 2020

Cancellations between 2nd May to 2nd July 2020: Payment of first night

Cancellations between 3rd July to 2nd August 2020: Payment of 50% of the stay

Cancellations after 2nd August 2020: Full Payment

**No-Shows will be fully charged**

**Early departure and/or Late arrival will be fully charged**

#### **Payment Policy**

Credit Card given by each guest is used as a guarantee for each reservation, but please note the Hotel reserves the right to charge the first night until 30 days before arrival. Remaining payment must be made directly upon check-out. If by any reason, payment is not done at check-out, Hotel Infante Sagres will charge the remaining amount on the credit card given.

### **Reservation Guarantee**

All reservations have to be guaranteed with a valid credit card number and expiry date.

Visa  Mastercard  American Express  Other

Credit Card Holder: \_\_\_\_\_

Credit Card Nr : \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_