# HydroPower Balkans - Reservation form

**Metropol Palace Belgrade** is looking forward to welcoming you in period **November 06-09** in Belgrade. Please use this form to make booking in Metropol Palace Belgrade for mentioned event. Rates are valid for period above and 2 days prior and post. Should you require a room outside the dates, booking will be accepted subject to availability at the best rate available at that time.

The cut-off date is **October 6th 2019.** All reservations received after **October 6th** will be accepted subject to availability at the best available rate at that time. Number of rooms at these promotional rates is limited. To book your room, please return completed form to our reservation department on e-mail:

reservations@metropolpalace.com

After submitting the form, you may expect writing conformation from reservation department.

# Room type (please tick): Number of rooms are limited per room type

ROOM TYPE RATE PER NIGHT

|  |
| --- |
| [ ]  Superior room single EUR 80[ ]  Superior room double EUR 95[ ]  Deluxe room single EUR 110[ ]  Deluxe room double EUR 125[ ]  Junior Suite single/double EUR 200* **Rates are** **per night, per room including buffet breakfast, VAT (10%), internet access (Wi-Fi and LAN), access to Hotel Fitness and Spa center Limegrove (swimming pool, sauna, steam bath, jacuzzi, relax room, gym).**
* **Rates do not include city tax (EUR 1.30 /RSD 155 per person, per night).**
* **Note that VAT and tourist tax are defined by local legislation and subject to change.**
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Special request: Smoking/Non Smoking:

(Please note that the Hotel will give its outmost to accommodate special requests but may not guarantee it. Special requests will be confirmed based on availability at the time of booking.)

# GUEST DETAILS

Guest name:                                Position/Title:

Company:                                     Address:

City:                      Post Code:                      Country:

Telephone:                           Fax:                           e-mail:

# Arrival & Departure

Arrival Date:                                Departure Date:

(Check-In Time from 14:00) (Check-Out Time until 12:00 noon)

# Transportation

Airport transfer service is available upon request and rate is 30 EUR per car, per way (by car). Should you need transfer services, please send your request latest 24 hours prior to arrival, together with flight details.

Arrival Flight Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure Flight Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# PAYMENT

[ ]  By cash or credit card, at the hotel: Kindly note that cash payments at the hotel may be done only in local currency (RSD)

[ ]  Bank transfer: Kindly provide us with invoicing details. Full prepayment is required prior arrival date.

[ ]  3rd party credit card: Kindly fill in bellow form and send it to hotel mail/fax.

# reservation guarantee

**No reservations will be confirmed, nor guaranteed unless credit card details are provided**.

Credit card details (credit card details will be used as reservation guaranteeCredit card type/name:

Credit card number:

Expiration date:

Card holder name:

Signature of card holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this I guarantee the above booking to this credit card and accept the terms of cancellation below

# cancelation policy

* Reservation may be cancelled without penalties 30 days before arrival date.
* For every reservation cancelled in period of 30 and 15 days prior to the date of arrival, guest will be charge of 50% of the total amount of stay.
* For every reservation cancelled after 7 days before arrival client will be charged for the total amount of stay.
* In case of guest’s non arrival (i.e. no show) and early departures, the client will be charged for whole duration of stay.

# Credit Card Authorization Form (in case that the third party will cover ANY HOTEL services ON BEHALF OF the guest)

I,                 (card holder’s name) authorize “Metropol Palace” hotel to apply the marked charge(s) mentioned below for the following guest to my credit card:

I hereby authorize the following charges to be applied:

[ ]  Room & tax only

[ ]  All charges

[ ]  Guest incidentals only

[ ]  Other:

Total amount to be charged in Euros:

Credit Card details:

Credit Card Number:

Expiration Date:

Printed name on the card:

Billing details:

Company Name:

Address:

City, State, Zip:

Date:

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