



**Hotel Reservation Form**  
Form to be returned by FAX or E-MAIL to address below  
Before September 01st 2018

**Holiday Inn Belgrade**

Spanskih boraca 74  
11070 Belgrade, Serbia  
Telephone: +381 11 3100 175, +381 11 3100 040 / Fax: +381 11 3100 100  
Mrs. Vesna Zivanovic / Mr. Petar Jankovic  
E-mail: [reservations@hibelgrade.rs](mailto:reservations@hibelgrade.rs)  
[d.simovic@hibelgrade.rs](mailto:d.simovic@hibelgrade.rs)

**Hotel Reservation Form**

**LifePharm Conference 05-07/10/2018**

Please complete this form in **block letters**.

In order to take advantage of these specially negotiated rates reservations should be made before 01.09.2018. All reservations will be confirmed according to hotels availability.

Please make your booking as soon as possible to have your rooms confirmed.

For multiple bookings, please photocopy this form.

**Period:** 05-07/10/2018

**1. GENERAL INFORMATION**

Full name: \_\_\_\_\_

Company/organization: \_\_\_\_\_

Billing address: \_\_\_\_\_

City and postal code: \_\_\_\_\_

Country: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone and Fax: \_\_\_\_\_

**2. HOTEL RESERVATION / Holiday Inn Belgrade**

**Arrival:** \_\_\_\_\_ **Departure:** \_\_\_\_\_ **Number of nights:** \_\_\_\_\_

Check-in: 15:00 hours

Check-out: 12:00 hour's noon

*Please tick accordingly, which room type you would like to book (\*please note that this is subject to availability)*

**Room type:**

**Rate:**

Single standard:

**EUR 75.00/room/night**

Double standard:

**EUR 85.00/room/night**

Twin standard:

**EUR 85.00/room/night**

**Room rates include buffet breakfast.**

**Rates include VAT but exclude city tax RSD 155 (app. EUR 1.3) per person/per day**

**Room rates are applicable for minimum 2 night's length of stay.**

### 3. METHOD OF PAYMENT

*Please select the payment method:*

Bank transfer (in case you chose this option, please send us the company details in order to receive invoice pro forma)

*Credit card:*

Visa     Euro Card/MasterCard     American Express

**Card number:** \_\_\_\_\_ **Expiry date:** \_\_\_\_\_  
**Name of cardholder:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

***By this signature I authorize Holiday Inn Belgrade to charge my credit card for the above requested services.***

### 4. CANCELLATION

Please note that once the reservation is made, 100% advance payment will be required.

#### **Cancellation policy:**

- Cancellations need to be sent in writing form to the contact information on the top of this form
- Release period for non guaranteed reservations is 12 days prior to arrival. If your reservation is an option, please guarantee your reservation with a credit card or company letter of credit so that we may keep your reservation active.
- **Cancellation period is 12 days prior to guest arrival. No-show/late cancellation fee is one night room rate.**

***In case of cancellation or no show I authorize Holiday Inn Belgrade to charge the penalty for amount to my credit card.***

An extra supplement will apply for:

Late check-out until 18:00 – 50% discount on the daily rate.

Late check-out after 18:00 – Full rate will apply.

**Hotel confirmation number:** \_\_\_\_\_ **Confirmed by:** \_\_\_\_\_

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