

# MERCURE GRAND WARSZAWA BOOKING FORM

Please complete this form and send to e-mail address: [H3384-re1@accor.com](mailto:H3384-re1@accor.com), or [h3384-re2@accor.com](mailto:h3384-re2@accor.com)

" RFC8"



Block Nr: 988457 (hotel use)



Special accommodation rates:

10 – 12/10/2018

SINGLE ROOM: 460 PLN PER NIGHT TAX AND BREAKFAST included

**Above rates apply to reservations made till 07/09/2018**

First Name: ..... Family Name:.....

Home Address:.....

Email:.....

TEL: ..... FAX: .....

Number of persons:  Arrival Date: ..... Departure Date: .....

Number of rooms required and type. (Write no. of rooms in the relevant box)

<input type="checkbox"/>	<b>SINGLE ROOM</b> Non smoking only
--------------------------	--

A cancellation free of charge up to 5 days before the planned date of arrival. A cancellation fee will apply if the booking is cancelled within 5 - 0 days of the planned date of arrival. The amount of the fee will be equivalent to the cost of ALL nights of accommodation and will be deducted from the guest's prepayment or applied to the guest's credit card.

Form of Payment:

Credit Card

Credit Card Details

or

Prepayment

Bank Account:

Societe Generale S.A. Oddzial w Polsce

**PL 97184000072211804008134519**

Cardholder First Name: \_\_\_\_\_

Cardholder Family Name: \_\_\_\_\_

Card Type: \_\_\_\_\_  
(e.g. Mastercard /Visa/American Express)

Card Number: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Card Expiry Month/Year: \_\_\_\_ / \_\_\_\_

Cardholder's Address: \_\_\_\_\_

\_\_\_\_\_

Date: .....

Signature:.....