



RESERVATION FORM

1. How many pax:			Private:		Business:		Special code for reservation:				
Arrival date:			Departure date:				room type	SGL	DBL	TWN	TRPL
GUEST NAME:											
Garanted Booking (Card):						FAX:					
						TEL:					
						EMAIL:					
Type of the card						Spec. Request					
CC number											
Exp.date:											
Name of card Cardholder:						Non Smoking / Smoking					

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