

Le MERIDIEN

ISTANBUL ETILER

Hotel Reservation Form for Borsa Istanbul Event

30.10.2017- 01.11.2017

Le Meridien Istanbul Etiler

Below mentioned room rates are inclusive of breakfast and exclusive of 8% VAT.

Single Deluxe Room € 90.-

Self payment

Covered by Borsa Istanbul

Double Deluxe Room € 100.-

Self payment

Covered by Borsa Istanbul

Guest Name :

Email & Phone number :

Arrival date :

Departure date :

Additional notes :

Please email the completed forms to Billur Karadeniz billur.karadeniz@lemeridien.com and CC to Emel Pinhas emel.pinhas@borsaistanbul.com

All rooms must be guaranteed with a credit / debit card- no reservation will be made without this information. Please provide the credit card information using the credit card authorization form attached in the next page.

Cancellation / No Show policy : For any cancellations as of Oct 18th 2017 no show which is equal to one night accomodation fee will be charged.

This form has been created in order to allow you to have third party expenses charged to your credit card. Please provide all the information requested below to ensure prompt processing of your application. We ask you to kindly sign and date the form and attach a copy of your id with both sides before submission.

Please fax the completed form to Le Meridien Istanbul Etiler (at 90 212 384 03 03)

Cardholder Information

Name as it appears on the credit card:

Card type: Visa Master Card Amex Diners JCB

Credit card number: _____ Exp Date : _____ Security Code: _____

Billing Address: _____

City, State and Zip: _____

Phone number: _____ Fax or alternate number: _____

Guest Information

Guest name: _____

Company: _____

Phone number: _____ Fax or alternate number: _____

Confirmation number: _____

Arrival date: _____ Departure date: _____

Approved Charges

All Charges Room & Tax Bed & Breakfast Extra Expenses Meals

Other: _____

I certify that all information is complete and accurate. I hereby authorize Le Meridien Istanbul Etiler to collect payment for all charges as indicated in the Rate Information and Approved Charges section of this form by processing a charge to the credit card listed above. This form is valid only for the term mentioned above. I understand that a new form will have to be completed if guest wishes to extend his/her stay. I certify that I am the authorized signer of the credit card listed above.

Cardholder name: (Printed) _____

Cardholder Signature: _____