### **NOVOTEL WARSZAWA CENTRUM BOOKING FORM**

# Please complete this form and send back to

# Reservation Department: fax no.: +48 22 596 01 22 or e-mail: [H3383-RE5@accor.com](mailto:H3383-RE5@accor.com)



**PL-RNA**

**Warszawa-27.09-01.10.2023 – SPECIAL OFFER**

**- 559 PLN netto ( 603,72 PLN brutto) za nocleg w pokoju standard jedoosobowym ze śniadaniem**

**- 599 PLN netto  ( 646,92 PLN brutto) za nocleg w pokoju standard dwuosobowym ze śniadaniem**

**Above special rates apply to reservations made till 28/02/2023**

**Suplement for superior room 30 PLN+ 8% VAT (32,40 PLN gross)**

**Suplement for EXECUTIVE 70 PLN+ 8% VAT (75,60 PLN gross)**

Rates are based on room-night and inclusive of buffet breakfast, WIFI Internet access in room, access to the hotel Wellness Centre.

**\* BOOKINGS WILL BE CONFIRMED AS AVAILABLE**

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| **Name and Surname:*............................................................………......………….…...……....................................................***  **Country*: ……………………………….***  **TEL: *......................................…………..................* FAX: *.........………………..……....................................***  **E-mail:....................................................................................*……….…...…….................................................***  **Arrival Date: *............................…………....* Departure Date: *...........…….….……...…..............................***  **Type of room /*please mark*/ : single standard**      **double standard**  Free cancellation is possible …… days before arrival. After this date, the total amount of a no-show or cancelled nights will be charged to the guest credit card.  **Form of payment:**    **Credit Card Name (type), number and expiry date of credit card will be send by email**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Prepayment**  Bank Account:  Bank Handlowy w Warszawie S.A.  IV Oddział w Warszawie  49 1030 1508 0000000 5030 18 004  **Date: ...............................…..…....… Signature:……………………..................** |