

ACCOMMODATION RESERVATION FORM

SUPERRETURN EMERGING MARKETS – 28TH JUNE – 30TH JUNE 2010

Hotel ref.: TPA

Please send or fax this form duly completed (type written or print) before May 28th 2010 :
 Reservations Dept. Tel. + 41 22 919 32 61 – Fax +41 22 919 32 54
 Email: reservations@intercontinental-geneva.ch

LAST NAME _____

FIRST NAME _____

ADDRESS

Street: _____

Tel: _____

City: _____ **Postal Code:** _____

Fax: _____

Country: _____

Email: _____

COMPANY : _____

ROOM TYPE TO BE BOOKED:

Classic room CHF 380.- single

CHF 430.- double

Junior suite CHF 510.-

Suite CHF 610.-

Rates are per room & per night and include VAT
 Subject to CHF 4.25 city tax per person, per night
 Buffet breakfast CHF 45.- per person per day

ARRIVAL DATE: _____

DEPARTURE DATE: _____

ARRIVAL TIME : _____

In order to guarantee your reservations, please provide the following information :

Amex Visa Eurocard Other _____

Number _____ Expiry Date : _____

In case of no-show (failing to occupy the booked room without cancellation prior to 24 hour before arrival date) one night will be charged. Cancellation possible until 6 pm the day prior arrival day.

SIGNATURE: _____

DATE: _____

HOTEL CONFIRMATION

We have the pleasure to confirm your reservation N° of confirmation: _____

Reservation agent: _____ Date : _____