**IFISA INTERNATIONAL CONFERENCE**

**Corfu, Greece, September 28-30,2020**

**Booking Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **To:** | **Corfu Holiday Palace Hotel**  **Mr. Byron Tsonakis** | | |
| **Fax Number :** | **+30 26610 45933** | **Tel Number:** | **+30 26610 36540** |
| **Address:** | **Nafsikas str. - Kanoni Area - Corfu Town, Corfu – GR - 49100** | | |
| **Email Address:** | **sales@corfuholidaypalace.gr** | | |
| **Total No.of pages:** | **3** | | |

1. **BOOKING DETAILS**

|  |  |  |
| --- | --- | --- |
| **First Name:** |  | |
| **Family Name:** |  | |
| **Arrival Date:** |  | |
| **Departure Date:** |  | |
| **No of Nights:** |  | |
| **No of Persons:** | **Adults:** |  |
| **Children:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Accommodation Requirements**  **(The prices are per room per night)**  Please tick choice of room | | | | |
|  | **Bed and Breakfast** |  |  |  |
| **Single room:** | **€ 110** |  | **Total:** |  |
| **Twin/Double room :** | **€ 130** |  | **Total:** |  |
| **Triple room:**  **3rd person 12+ y.o** | **€ 175** |  | **Total:** |  |
| **Family room**  **2 adults + 2 children 2-11,99 y.o** | **€ 180** |  | **Total:** |  |
| **Family room**  **2 adults + 2 children 12+ y.o** | **€ 220** |  | **Total:** |  |
| **Family room**  **2 adults + 2 children 2-11,99 and 12+ y.o** | **€ 200** |  | **Total:** |  |
| **Suite**  **2 adults or 2 adults and 2 children** | **€ 240** |  | **Total:** |  |
|  |  |  | **Total Cost:** |  |

**Above rates do not include the overnight tax of € 4,00 per room per night payable by guests on arrival at the hotel.**

1. **CONTACT DETAILS**

|  |  |
| --- | --- |
| **Please confirm my booking by Fax** | |
| **Fax Number :** |  |

**OR**

|  |  |
| --- | --- |
| **Please confirm my booking by E-mail** | |
| **E-mail Address:** |  |

1. **PAYMENT INSTRUCTIONS**

|  |  |  |
| --- | --- | --- |
| **CREDIT CARD PAYMENT** | | |
| **I wish to pay by credit card** |  | (TICK THIS BOX) |
| Card details |  | |
| Type of card: |  | |
| Name on card: |  | |
| Card number: |  | |
| Expiry Date: |  | |
| Verification number /CVV (3 digit number at the back of the credit card) |  | |
| Authorization to charge one night to card: |  | |
|  | (Signature of card holder) | |

|  |  |  |
| --- | --- | --- |
| **BANK TRANFER** | | |
| **I wish to pay by Bank Transfer** |  | (TICK THIS BOX) |
| Payment to: | National Bank of Greece Corfu Branch | |
| Account number: | 374 47041502 | |
| IBAN number: | GR10 0110 3740 0000 3744 7041 502 | |
| Swift code: | ETHNGRAA | |
| To the order of: | Hotel & Tourist Enterprises Tsaousoglou S.A. | |
| **Please specify payment is for – “IFISA CONFERENCE”** | | |

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| **ADDITIONAL INFORMATION** |
| *Attendees will receive immediate confirmation of booking from the Hotel (by fax or e-mail), or as soon as the bank transfer is received.* |

1. **Deadline for reservations is 31/5/2020. After that date rooms will be on request and subject to availability.**
2. **The one-night deposit charged to the CC will not be reimbursed in case of cancellation of your reservation. If the reservation is cancelled within one month prior to the date of arrival or in case of No show then 50% of the total value of the reservation will be charged to your credit card (after deducting the one night deposit).**