

Radisson Royal Hotel Moscow

BOOKING FORM

According to the Contract # _____ dated _____ 2011, reference RHIC Conference

<i>Contact person:</i>		<i>Phone:</i>	
<i>Company Name:</i>		<i>Fax:</i>	
<i>E-mail:</i>			

Guest Name:	Date of Arrival	Date of Departure	No. of Nights	No. of Rooms	No of Pax
					Adults

ROOM TYPE	SPECIAL RATE		Rates: 1. All rates are inclusive of Super Buffet Breakfast 2. 18%VAT is not included 3. All rates are per room per night inclusive of Free use of the Fitness Center, Free Wireless Internet <input type="checkbox"/> <u>Smoking Room</u> <input type="checkbox"/> <u>Non-Smoking Room</u>
	SINGLE	DOUBLE	
Superior Room	9 000 RUB	10 000 RUB	

Reservation policy and Special conditions:

The rate, mentioned above, is valid for stay between October 17, 2011 and October 25, 2011. In order to receive reservation confirmation, please forward us this booking form and authorization form filled by September 15, 2011 latest. Check in time is 3:00 pm Moscow time, check-out time is 12:00 am Moscow time.

Changes and Cancellation Policy:

Changes and cancellations free of charge can be done before September 15, 2011. In case of no-show or cancellation after September 15, 2011 one night charge is applied.

Payments:

Authorisation form and copy of credit card (both side) is attached. The credit card details provided in authorization form will be used as guarantee for this reservation.

Additional services:

Visa Support Service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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**Please sign and fax back to + 7 495 4110025 or e-mail: groups.royal.moscow@radisson-hotels.ru
Thank you for choosing Radisson Royal Hotel Moscow**

<i>Confirmed By Radisson Royal Hotel Moscow:</i> _____	<i>Date:</i> _____	<i>Confirmation No:</i> _____
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AUTHORISATION FORM / АВТОРИЗАЦИОННАЯ ФОРМА

I, the undersigned card holder _____ authorize JSC "Hotel "Ukraina" (The Radisson Royal Hotel, Moscow)
Настоящим Я, _____ разрешаю компании ОАО "ГОСТИНИЦА "УКРАИНА" (Рэдиссон Ройал Отель, Москва)
Name of the Cardholder / Ф.И.О. владельца карты

to guarantee late arrival with my (company) credit card № _____ expiry date _____
гарантировать поздний заезд моей (компании) кредитной картой № _____ действительна до _____

of Reservation № _____
бронирование № _____

on the name of Mr. / Mrs. _____ during his/her stay in the hotel _____
на имя Г-а/Г-жи _____ за период его /ее проживания в гостинице _____
Name of the Guest / Ф.И.О. гостя please specify period / укажите даты проживания

I herewith enclose a copy of my credit card
Копия обеих сторон кредитной карты прилагается

Face side / Лицевая сторона	Back side / Обратная сторона
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All payments are done in RUB / Все платежи производятся в рублях

Cardholder Signature _____
Подпись владельца карты _____

Date _____
Дата _____



*** In case of late cancellation or non-arrival after 15.09.2011 the provided credit card will be charged the first night room cost**

* В случае поздней отмены или незаезда после 15.09.2011, с предоставленной кредитной карты будет удержана стоимость первой ночи проживания

**** Uncompleted Credit Card Authorisation Form or Form without credit card copy will not be accepted**

** Неполностью заполненная авторизационная форма или форма без копии кредитной карты не принимается