Dubai Cardiac 2007

Dubai 2007

December 10 - 12

HOTEL RESERVATION FORM

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INDEX Conferences & Exhibitions Org Est., P.O.Box 13636, Dubai – UAE.
Tel: +971 4 362 4717; **Website**: www.index.ae

GUEST INFORMATION

Guest Title : ☐ Mr ☐ Ms ☐ Mrs ☐ Prof ☐ Doctor ☐ Other_____ **Gender** : ☐ Male ☐ Female

I am a : ☐ Exhibitor ☐ Participant

Guest Name : _____
First Name *Middle Name* *Last Name*

Company Name : _____
(if Exhibitor)

Address : _____

City: _____ **State**: _____ **Country**: _____ **Zip/Postcode**: _____

Nationality: _____ **Passport No**: _____ **Mobile** : _____
(Country Code+Area code+Number)

Phone: _____ **Fax**: _____ **Email**: _____
(Country Code+Area code+Number) *(Country Code+Area code+Number)*

HOTEL BOOKING

Select Hotel from list provided. Please indicate three choices of hotels in order of preference.

1. _____

2. _____

3. _____

RESERVATION DATES

Check in Date : DD / MM /2007

Check Out Date : DD / MM /2007

HOTEL ROOM PREFERENCES

☐ Single ☐ Double ☐ Twin ☐ Non-Smoking ☐ Special Needs

*Special Requests*_____

FLIGHT DETAILS

Arrival Date: / /2007 **Time**: _ _ / _ _ (am/pm) **Flight no**: _____ **Airline Name**: _____

Departure Date: / /2007 **Time**: _ _ / _ _ (am/pm) **Flight no**: _____ **Airline Name**: _____

TERMS & CONDITIONS

1. Booking fee of US$ 25 will be charged per room per booking.
2. Booking fee entitles you for one change in the reservation only.
3. Booking fee of US$ 15 will apply for every additional change, thereafter.
4. Booking fee applies irrespective of the length of stay or the category of the Hotel.
5. Booking fee is non-refundable.
6. Booking fee will be charged by Index Conferences & Exhibitions Organisation Est.
7. Hotel deposit of one night room rate is applicable to secure booking.
8. Hotel will deduct the deposit amount from Credit Card.
9. Hotel deposit is non-refundable.

PAYMENT TERMS

1. Guest Cancellation after 08th November 2007 will result in full stay charges, as per the number of nights booked by the guest.

NOTES: All Payments are requested to be made in US$ only. Payment should be made in advance to confirm booking

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PAYMENT DETAILS

☐ VISA ☐ MASTERCARD

CREDIT CARD NUMBER: | | | | | | | | | | | | | | | | |

EXPIRY DATE : _____/_____ (mm/yyyy)

NAME ON THE CARD: _____

CVV CODE : _____ _____ _____
(Last 3 digits on the back of the card)

☐ I, _____ hereby authorize INDEX Conferences & Exhibitions Org Est. to charge Booking Fee on the above Credit Card and forward my Credit Card information to the selected Hotel above to settle the Hotel Deposit. I am aware that Booking Fee and Hotel Deposit are non-refundable. If I or others booked through this form fail to arrive for my/their assigned hotel on the confirmed arrival date, cost of the full stay will be charged on the above mentioned Credit Card.

GUEST SIGNATURE: _____