



Radisson Blu Lisboa

Av. Marechal Craveiro Lopes, 390

1749-009 Lisbon - Portugal

www.radissonblu.com/hotel-lisbon

BOOKING FORM

PLEASE FILL AND ADDRESS TO:

SALES CENTRE

FAX: +351.21.7962130 TELEF: +351.21.0046046

Clara Ferreira

clara@grupo-continental.com

Paulo Almeida

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Rita Pombo

Rita.pombo@continentalhotels.eu

SUBJECT: "Internacional Congress of Cultural Tourism – 30th October / 01st November 2014"

GUEST NAME: _____

MY FAX NUMBER: _____

MY TEL. NUMBER: _____

MY E-MAIL ADDRESS: _____

Dear Sirs,

I would like to confirm ____Single ____Double room at **Radisson Blu Hotel Lisbon.**

Arrival ____/____/____

Departure____/____/____

➤ **SINGLE:** 75 €

➤ **DOUBLE:** 85 €

Rates per room, per night, include American Buffet Breakfast, all taxes and service.

CREDIT CARD DETAILS:

AMEX Diners Maestro Master Card Visa Other _____

Credit Card holder's name: _____

Credit Card Number: _____

Expiration Date: ____ / ____ CCVC Code: _____

Cardholder's Signature _____

(same signature as stated on credit card)

Address of the Credit Card Holder: _____

Remarks:

✓ Dead line for reservation - 30th September 2014

✓ Cancellations – Until 48 hours prior to arrival – cancellations after this date, the hotel will charge 1 night on credit card informed.

✓ In case of "No show" Hotel will charge 2 nights on the credit card informed and remaining nights will be released.