



## HOTEL BOOKING FORM

**EBC Symposium**

**18-22 May 2025**

**Budapest, HUNGARY**

To make a reservation at **NOVOTEL BUDAPEST CITY\*\*\*\*** please return this form not later than **18.04.2025** to the below mentioned contact.

**After the booking deadline the hotel offer accommodation upon availability.**

For hotel details please, visit the following web page: <https://all.accor.com/hotel/0511/index.en.shtml>

**Please complete one form per room:**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail: \_\_\_\_\_

Room category and rate:

Single:  (EUR 119) Double: \*) (EUR 133) Prices per room per night/including breakfast

**The offered rates include the buffet breakfast, 5% VAT and 4% local tax.**

\*) I share the room with: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_ No. of Nights: \_\_\_\_\_

Credit Card Company: \_\_\_\_\_ Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Holders Name: \_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

Authorised Signature

**Please note the reservations need to be guaranteed by credit card or deposit sent to the hotel against its pro forma invoice.**

### BOOKING / PAYMENT INFORMATION

1. On receipt of your reservation form your booking will be reconfirmed.
2. In case of no-show or late cancellation total cost of the stay will be charged as penalty.
3. Cancellation deadline for the reservation is **14 days** prior to arrival.
4. Check-in time: **from 3 PM, check-out: until 10 AM.**

**Please e-mail or fax this form to Hotel Novotel BUDAPEST CITY:**

Fax: **+36 1 466 56 36**

Email: [monika.gellert@accor.com](mailto:monika.gellert@accor.com)