## **E N V O Y** H O T E L

| RESERVATION FORM<br>ECER 2025<br>07-13.09.2025  |                   |
|---|-------------------|
| Please complete the required form & return BACK by e-mail.  |                   |
| E-mail: info@envoyhotel.rs  |                   |
| LAST NAME:  | FIRST NAME:       |
| ADDRESS:  | POSTAL CODE:      |
| E-MAIL :  | PHONE:            |
|   |                   |
| ARRIVAL DATE:   | DEPARTURE DATE:   |
| ARRIVAL TIME:   | DEPARTURE TIME:   |
| <ul> <li>Standard/ King Room (single use)</li> <li>Superior Twin Room or King room( double use)</li> <li>City tax 1.4€ per person per day is not included in room rate</li> </ul>   |                   |
| PAYMENT AND CANCELLATION TERMS  |                   |
| <ol> <li>As guarantee of your reservation we require your credit card number with the expiration date. All the reservations will be upon request and availability.</li> <li>Upon confirmation we require one night as 1<sup>st</sup> deposit to be payable through credit card.</li> <li>Final settlement upon arrival from the hotel.</li> <li>Cancellation Policy:</li> </ol> |                   |
| <ul> <li>In case of cancellations 3 days prior the arrival date or NO SHOW, you will be charged with total.</li> <li>Please note that in case of any change or cancellation will be valid only in written.</li> </ul>   |                   |
| The deadline for reservation: <b>12.05.2025.</b>  |                   |
| Name od Card Holder:  |                   |
| I authorize you to debit my credit card for the above accommodation expenses.<br>CREDIT CARD:   |                   |
| Credit card   |                   |
| Card No:  | Card expiry date: |
| Signature:  | Date:             |