

45° IAFEI Congress Oct. 12 - Oct. 16 2015 Block n 1391154

CREDIT CARD AUTHORIZATION FORM

Please send the fully completed form by fax to our reservation office at +39 02 66 746 165.

Name	Check in	Check out
_____	_____	_____

- N. 01 Double for single use Classic room - no smoking
- N. 01 Double for double use Classic room - no smoking

Double for single use Classic no smoking : 255,00€
Double for double use Classic no smoking : 275,00€

Rates are per room per night - inclusive of American Buffet Breakfast & 10% VAT
Free internet access Wi-Fi at the public areas by voucher to ask at the Reception.
Free bottled water and Coffee/tea maker in room
Free access to Fitness Center

City tax is not included in the room rate and is to be settled upon check out.
For full details on tax charges, reductions or exemption, please visit:
http://www.fourpointsmilan.com/en/city_tax

In case of any taxes changes dictated by the Government or city authorities the rates will be accordingly.

Cancellation policy: Cancellation policy without penalty up to 29 days from date of arrival. After this date will be charged 100% of the booking cancelled.

Payment conditions: by self at desk

To guarantee the reservation Hotel will ask a pre-authorization (not a pre-payment) on guest's Credit Card upon guest's reservation for the value of the stay.

Upon check-in guests will be required to provide a credit card to guarantee, even if room is prepaid, to cover any extra charges.
As an alternative, a cash deposit can be accepted. It will be refunded at the check-out.

Rooms Allotment with automatic release for rooms not pick up on Oct. 07 2015
After that date availability and rates could change without notice.

As stated on the credit card:

Credit Card holder's name _____

Credit card _____

Expiring date ___/___

Billing data:

Please tick box if you wish to receive the invoice

Invoice header _____

Address _____

City _____

ZIP _____ Country _____

Phone _____ Fax _____

Email _____

Tax Code _____ /VAT _____

Date _____ Signature _____

Telephone number: _____

EMAIL ADDRESS: _____

*****Please note that booking request is confirmed after to receive Hotel Official Email confirmation provided of reservation number*****

Four Points Sheraton Milan Center
Via Cardano n. 01
20124 Milano - Italy
Reservation Office: booking@fourpointsmilano.com