



RESERVATION FORM

Reservation Ref: 78394262—TERENA

Name Hotel NH City Centre
Address Spuistraat 288-292
1012 VX Amsterdam
E-Mail book.amsterdam@nh-hotels.com
Fax. +31 (0)20 554 4400
Tel. +31 (0)20 554 4000

Last Name:	First Name:
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Company Name:

Telephone:	E-mail:
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Date of Arrival:	N° of nights:	Date of Departure:
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Type of Room:	Single, one person	€ ...,00	<input type="checkbox"/>
	Double, two persons	€ ...,00	<input type="checkbox"/>
	Deluxe room	€ ...,00	<input type="checkbox"/>

Credit card number:	Expiry date:
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Name of Cardholder:	Signature:
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To be completed by the hotel.

Confirmed by _____ Date _____

Booking Number _____

Before completing this form, please read the following important information:

- The hotel only accepts reservations guaranteed with a credit card number and expiry date.
- Cancellations must be made before 4 pm on the day before arrival in order to avoid charges.
- Check-in time is from 3 pm. Check-out time is 12 noon.
- You are advised to **reserve before 14th November 2008**. After this date rooms will be reserved on a rate and/or space availability basis only.
- Room rates are per room per night inclusive of 6% VAT and service. The breakfast buffet (€..18.....per person) and 5% city tax is excluded.
- No shows will be held until 12.00 am the next day. One night only will be charged.
- Extended stays, subject to availability, can be booked at the same special conference rate.
- All changes and cancellations must be made by the hotel directly with the hotel via telephone, fax or email.