

**IBM** **TechU** **Feb** **03-04-05-06,** **2020** **|** **Hotel** **Booking** **Form**

**Attention** **to** **Wyndham** **Grand** **Istanbul** **Levent**

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**Room** **Rates** **Room** **Type** Deluxe Room

**Single** **Occupancy** EUR 135 + VAT (8%)

**Double** **Occupancy** EUR 145 + VAT (8%)

**Terms** **&** **Conditions**

The above rates are inclusive of breakfast and internet in room.

To enjoy the room block of the IBM TechU 2020, this form is required to e-mail to the hotel. [meltem.tunc@wyndhamgrandlevent.com a](mailto:meltem.tunc@wyndhamgrandlevent.com)nd [21@wyndhamgrandlevent.com](mailto:21@wyndhamgrandlevent.com) by Wednesday, **Jan 03, 2020.**

No advance payment is necessary, but credit card detail is required to guarantee your hotel reservation. Provision for accommodation and extras shall be settled at the hotel upon check-in and payment for accommodation and extras shall be settled at the hotel upon check-out.

By providing credit card details, cardholder agrees to the reservation guarantee policy. Check-in time is after 14:00 hrs. Check-out time is before 12:00 hrs.

For any guests who would like immediate guaranteed access to their rooms prior to 14:00 hrs check-in time, the room should be reserved from the previous evening. This will incur an additional one-night accommodation charge.

For any guests who would like to request for late check-out, room may be extended until 6 pm at 50% of the room rate subject to availability. For check out after 6 pm, will incur an additional one-night accommodation charge.

**Cancellation** **Policy**

Reservation has to be made before **Jan 03, 2020.** If you cancel hotel reservation after Jan 03, 2020, the hotel reserves the right to charge your credit card for entire booking.

If you fail to attend (no show), the hotel reserves the right to charge your credit card for entire booking.

Guest Name and Surname:

Company:

Address:

City:

Passport Number:

Telephone:

Country:

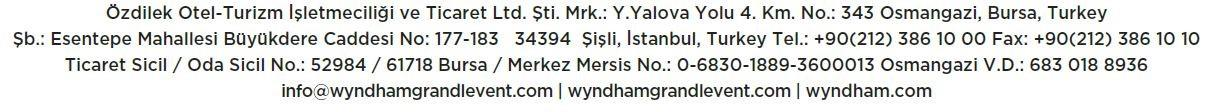
Date of Birth:

Email:

**Please** **put** **the** **no.** **of** **room(s)** **required** **and** **the** **no.** **of** **guest** **(s)** **in** **the** **selected** **room** **type**

Deluxe Room \_\_\_\_Room (s)\_\_\_\_Person (s)King Twin

**Preference** Smoking Non-Smoking



**Credit** **Card** **Details**

Type of Credit Card / Bank Name:

Name and Surname of Card Holder:

Credit Card Number: Expiry Date: / CVV:

Signature of Cardholder:

Date:

**Private** **Airport** **Transfer**

To arrange your private airport transfer via the hotel, please contact Concierge Department by [concierge@wyndhamgrandlevent.com](mailto:concierge@wyndhamgrandlevent.com)

**All** **reservation** **is** **required** **to** **be** **guaranteed** **by** **a** **major** **credit** **card.**

**Please** **submit** **this** **form** **before** **Jan 03, 2020.**

