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## RESERVATION FORM

International Federation of Landscape Architects- America

October 24-28, 2016

**Block Code: A24**

### **Room Special Rates for Group:**

#### **Deluxe Accommodation**

**Single Occupancy** USD\$99.00 + 10%

**Double Occupancy** USD\$109.00 + 10%

A surcharge of US\$10.00 applies per 3<sup>rd</sup> and 4<sup>th</sup> person in a room / per night.

A charge of \$2.00 per room per day will be charge for Housekeeping gratuities

#### **Room Rate includes:**

- Breakfast Buffet in the Canal View Restaurant
- Wireless Internet in sleeping rooms and all public areas

Hotel room rates are subject to applicable local taxes (10% occupancy ) in effect at the time of check in. The Hotel will be applying \$ 2.00 USD per night, per room for Housekeeping.

There is no extra fee for children under 12 years of age when sharing with parents.

Maximum number of guests per room is three adults or 2 adults and 2 children (under 12 years).

The hotel cannot guarantee any additional beds for the contracted room types including suites.

Rates per room, per night in USD. Please note that **check-in** is possible as of **3:00 p.m.** and **check-out** is required by **12:00 hrs noon**. Arrange directly with the Hotel should your requirements differ.

**International Federation of Landscape Architects- America has secured accommodations on your behalf. This rate will be available until Monday, October 3, 2016**

Furthermore, on **Monday, October 3, 2016** , all rooms and rates will be subject to the hotel's room and rates availability at the moment of request. Hotel will honor the rate for those guests who arrive 3 days prior the meeting and stays 3 days before de period established for the meeting.

#### **How to Book:**

Complete this hotel booking form and send it by fax to our Reservations Department of **HOTEL HOLIDAY INN PANAMA** to (507) 214-1002 or by email to [groups@bernhotelspanama.com/gherrera@bernhotelspanama.com](mailto:groups@bernhotelspanama.com) . If you have any question please contact our reservations department at (507) 340-9858 (Monday – Friday: 8:00a.m – 5:00p.m / Saturday: 8:00a.m – 12:00p.m).

#### **How to pay & guarantee your accommodation:**

A one night deposit will be charged at the moment the reservation is requested. Guest must complete credit card information.

Changes, modifications or cancellations (including anticipated departures or late arrivals) will be allowed until **Monday, October 3, 2016** with a penalty charge equivalent to one night plus taxes. After this date or once the client has checked in, 100% of the original booking will be charged, plus any other additional dates in the event of early arrivals or extended departures.

#### **NO SHOWS, CHANGES OF DATES AND EARLY CHECK OUT**

Any changes of dates, early check out (before original group departure), and “no shows” for individual reservations from the group, or the entire group, received 21 days or less prior to group arrival, the Hotel will charge a 100% of the room revenue reservation to each participant .

**PLEASE FILL IN THE FOLLOWING INFORMATION:**

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Accompanying person:

\_\_\_\_\_

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

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Deluxe Single  Deluxe Double  Suite ster Suite

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Type of Credit Card: **Mastercard**  **Visa**  **Amex**

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name shown on card: \_\_\_\_\_

Priority Club Rewards No: N° \_\_\_\_\_

**Declaration of Consent:**

I understand and accept the cancellation clause explained above and authorize the Hotel to charge my credit card if I may incur in penalty.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_