## 9th Arab-German Energy Forum

October 24th - 25th, 2018

Cairo, Egypt

## Hotel Booking Form:

Delegate's Details:		Passport no:
Name:		
Company Name:		
Tel:Mobile:		
E-mail:		
City:	Country:	Flight Details:
		_
Semiramis InterContinental Hotel Cairo (the event venue):		Arrival Date & Time:
Room Type	Room Rate	Arrival Flight Number
Single Standard Nile View	□ USD 130.00	Departure Date & Time:
Double Standard Nile View	□ USD 140.00	Departure Flight Number
<ul> <li>Kindly note:</li> <li>➢ The above rates are per room</li> <li>➢ 14 % VAT will be added</li> <li>➢ 01% municipal tax on the total</li> </ul>		
<ul> <li>Breakfast, and are net, non-commissionable .</li> <li>Buffet Breakfast is included.</li> <li>Hotel check in time at 15:00 &amp; Check Out at 12:00</li> <li>Early check in &amp; Late checkout are subject to availability. Extra Fees can be applied.</li> </ul>		<ul> <li>Cancellation &amp; No-Show Policies: In case of cancellation 20 days prior to the arrival date, one night full accommodation fees will be charged to the mentioned Credit Card.</li> <li>Any cancellation 7 days to arrival date or no show, full accommodation stay will be charged to the above Credit Card.</li> <li>In case of early departure, full stay will be charged to the above Credit Card as per origin booking.</li> </ul>
Booking Details:		Room bookings are on first come first served
Check-in date:	Check-in time:15:00	<ul> <li>basis and will be subject to availability.</li> <li>➢ If you require different room type or different</li> </ul>
Check-Out date:	Check-Out time: <b>12:00_Noon</b>	hotel, please inform us and will try to provide you upon availability.
Total Number of Nights:		
I authorize <b>The Hotel</b> to charge my credit card in case of cancellation, according to the Cancellation policies stated on the right, and in case of no-show at the hotel on the arrival day. (Please provide us with a copy of both sides of your Credit Card, as the 3 security digits Code is required for collection, as well as a copy of your passport)		Kindly fill out this form and send it by email to : Mr. Mohamed Nawara Email: <u>fedcoc@hotmail.com</u>
Credit card type:	□ Visa □ MasterCard □ Amex	Tel: 0020227953677 / 002035013752 Fax: 0020227951164
Card number:		
		Email: <u>uac@uac.org.lb</u> Tel: 00961 1 826021
Date of expiry:	CCV:	<b>Fax</b> : 00961 1 826020
Card holder name + signature:		

Union of Arab Chambers Tel. / Fax: 00961 1 826 020/21/22 Email: UAC@uac.org.lb

## Federation of Egyptian Chambers of Commerce

Tel: 0020227953677 / 002035013752 Fax: 0020227951164 Email: <u>fedcoc@hotmail.com</u>