



Novotel & Ibis Gate Abu Dhabi - Booking Form
November 14 – 17, 2016
Al Ain University of Science & Technology
MMS2016

Hotel	Single Occupancy Rate	Double Occupancy Rate	Triple Occupancy Rate
<input type="checkbox"/> Novotel - Superior room	<input type="checkbox"/> AED 435	<input type="checkbox"/> AED 485	<input type="checkbox"/> AED 605
<input type="checkbox"/> Ibis – Standard room	<input type="checkbox"/> AED 335	<input type="checkbox"/> AED 385	N/A

- Above mentioned rates are per room per night, inclusive of Buffet Breakfast and Internet
- Above mentioned rates are **inclusive** of 10% service charge, 6% tourism fee, & 4% municipality fee
- Above rate is inclusive of AED15 per room per night as Municipality Room Fee
- Booking should be made before _____, after this date rooms & rates are subject to availability
- Please mark the applicable box for your booking request

Guest's Name: _____

Address: _____

Email: _____

Telephone: _____

Room Type: _____

Arrival Date/Time: _____ Flight No.: _____

Departure Date/Time: _____ Flight No.: _____

I hereby agree to pay Novotel & Ibis Gate Abu Dhabi, the following charges with my credit card, using the link I will receive from the hotel by email, which is 3D secure :

- | | |
|--|---|
| <input type="checkbox"/> ALL CHARGES | <input type="checkbox"/> ROOM CHARGE ONLY |
| <input type="checkbox"/> TOURISM DIRHAM FEE | <input type="checkbox"/> MEALS (INCLUDING ALCOHOL) |
| <input type="checkbox"/> MEALS (EXCLUDING ALCOHOL) | <input type="checkbox"/> LAUNDRY / DRY CLEANING |
| <input type="checkbox"/> NO SHOW / CANCELLATION CHARGES | <input type="checkbox"/> EXTENSION NIGHTS |

OTHER CHARGES _____
 (Please specify)

Credit Card Details :

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> VISA CARD | <input type="checkbox"/> DINERS CLUB | <input type="checkbox"/> AMEX |
| <input type="checkbox"/> MASTER CARD | <input type="checkbox"/> OTHERS | |

Credit Card Number _____

CVC Code _____

Expiry Date _____

Name of Cardholder _____

Signature of Cardholder _____

Please forward completed form with all details and signed form to : H6948-RE1@accor.com, tel no. +971 2 5089999