

HOTEL RESERVATION FORM

CAPP Conference Group

Title:	Mr. / Mrs. / Miss
First Name:	
Last Name:	
Designation	
Company:	
Tel. No.:	
Fax No.:	
E-mail:	
Arrival Date:	
Arrival Time / Flight No.	
Departure Date:	
Departure Time / Flight No.	
Visa Required:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Airport Transfer required:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Room rates:

<input type="checkbox"/> Single occupancy	\$ 75/ AED 275
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- Above room rate is per night for single / double room.
- **The above rate is inclusive breakfast and free transportation to conference venue.**
- Kindly note that booking should be confirmed before 30 April 2010, otherwise, rates will be subject to availability.

Please send your request to:

Darya Ilyoushonok
Sales Manager

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