

## Producción y Desarrollo de Reservas

5 - 8 de Noviembre 2019 Mar del Plata, Argentina														
PERSONAL INFORMATION														
Last name:	First name:													
ID card:	Institution:													
Address:				City:										
Province:	ZIP code:Country:													
Telephone #:	E-mail:													
Reservation (official hotels)														
Rates are quoted in US dollars and 21% VAT is not included. Rates per room / night.														
Hotel		Room type	Check IN	Check OUT	Rate p/day (without VAT)	Total stay (without VAT)	Specific requirements							
					USD	USD	0							
				USD	USD	0								
SPECIAL REQUIREMENTS														
<ul> <li>(1) Early check in (*)</li> <li>(2) Late check out (*)</li> <li>(3) Double (double bed)</li> <li>(4) Double (twin</li> </ul>														
(5) Specific requirements (*) to book, it is necessary to pay the extra night														
Payment terms and conditions – CANCELLATIONS														
Reservation guarantee Credit card. The credit card inform cancellations or no show (see terr Wire transfer. Please ask for ban G2 Consultora sends the reservat Cancellation policy (official hot Cancellations received until Augus Cancellations received after Octol CANCELLATIONS: Must be sent via e-	ns and conditions below ik information to guaran ition request directly to th els) st 5, 2019: will have no st 6, 2019: one night wi ber 15, 2019 (cancelled	). tee the reservation he hotel; this is a penalty. Il be charged as rooms – cancell	on with the payment of one nig n exclusive service to the Con cancellation fee.	oft rate. The corresponding gress participants. The Ho	g wire transfer receipt must be	sent to: <u>hoteleria@g2consul</u>	ltora.com							

\* To guarantee the reservation, please complete the credit card information. Otherwise, the reservation will not be processed.

CREDIT CARD INFORMATION																		
Credit card	$\bigcirc$	Visa			$\bigcirc$			MarterCard				$\bigcirc$				American Express		
	[																	
First / last name													_ID	card	d ho	lder_		
Expiration date													_Sec	curit	ty c	ode _		
E-mail													_Re	serv	atio	on da	te_	
Signature																		

All fields must be completed to process the reservation.

I authorize the use of this credit card to guarantee the reservation based on the hotel cancellation policies.

