
MTN REGIONAL MEETING 2011

Mr. Mrs. Ms Dr Prof Other _____

First Name _____

Surname _____

Address _____

Suburb / Town _____

Country _____

Postal / Zip Code _____

Telephone _____

Fax _____

Mobile / Cell Number _____

Email _____

Arrival Date _____

Arrival Time _____

Departure Date _____

Departure Time _____

A 50% deposit is required to secure your accommodation, and credit card details to secure the balance

Standard Single Room R 1,695.00 Standard Double Room R 1,895.00

* These rates are per room per night, including breakfast and VAT, excluding 1% tourism levy

All cancellations received between 08 August 2011- 0(zero) days prior to arrival date will be liable for the full accommodation period cancellation charge. Should you fail to arrive at the hotel on the stipulated date, you will be charged 100% no-show fees.

Method of Payment (To be received within 7 days upon making your booking)

Visa Master Card American Express Diners

Credit Card Number _____

Expiry Date _____

CVV Number _____

*** Please include a copy of the front and back of the credit card in order for the hotel to charge the card.**

Bank Transfer

Name of Bank: NEDBANK
Branch: Corporate Client Service-Johannesburg
Branch Code: 145 405
Account Number: 145 409 8384
Swift Number: NEDSZAJJ

*** Please forward a copy of the deposit slip as proof of payment to deidre@iafrica.com or fax to +27 21 425 8686**

Signature authorizing the debit of credit card and acceptance of terms and conditions _____

Date _____