



HOTEL BURGAS

RESERVATION FORM

Fill in the required fields and fax this reservation form to the following fax number - +359 (0) 56 836666

Merchant Name: CONDOR TRAVEL LTD

Merchant Address: 5 Han Krum Str.
8000 Burgas
Bulgaria

Phone: +359 (0) 56 816666

Fax: +359 (0) 56 836666

e-mail: reservations@hotelburgas.com

Cardholder name:

Cardholder address:

Cardholder e-mail:

Cardholder card Number:

Cards expiry date:

Passenger or guest name if different than cardholder name:

CVV2/CVC2 /the last 3 digits of the code written in italics on the back of the card/:

I allow my credit card to be charged of any expenses that I have incurred during my stay in hotel "Burgas".

Cardholder signature:

Client shall owe penalty amounting to one night for each booking, if it should not advise the **Hotel** for the cancellation of the booking within 24 hours prior to the date arrival. In such case, **Hotel** shall withhold the value of the first night of the booking