

Reservation Form

Please complete the form in its entirety and send it to tbilisi@roomshotels.com by latest 15.05.2015 to ensure safe and rapid handling of your request.

This reservation form enables guests of **ECA Legal Forum** to use specially proposed room rates for June 15-22:

Urban Queen Room	Garden View Twin
□ 130 USD – Single Occup	ancy \Box 140 USD – Single Occupancy
□ 145 USD – Double Occup	pancy
Signature King □ 160 USD – Single Occup □ 175 USD – Double Occup	anod Wi Fi internet
Guest Name	\/
Address	/ \ / \ / \ / \ / \ / \ / \ / \ / \ / \
Telephone/Fax	\/
Arrival Date/Time	/ \ / \ / \ / \ / \ / \ / \ / \ / \ / \
Departure Date/Time	

Cancellation Policy:

- Cancelling room reservation 14 days prior to arrival date will result in no charge
- In case of cancellation after the deadline, 50% of entire stay will be charged
- / In case of No Show, 100% of entire stay will be charged

Check In/Check Out Policy:

- Check in time is from 14:00 and check out time is till 12:00
- Early arrival before 07:00, 100% room rate (excl. VAT) will be charged, early arrival after 07:00 till 14:00 50% of room rate (excl. VAT) will be charged
- A late departure fee 50% (excl. VAT) will be applied in case of departure between 15:00-18:00, 100% of room rate (excl. VAT) after 18:00

Rooms Hotel Tbilisi, Address: 14, Kostava Str., 0108, Tbilisi, Georgia, Phone: +995 32 2020099, Fax: +995 32 2020022, tbilisi@roomshotels.com www.roomshotels.com



Credit Card Number	
Credit Card Tumber	
Expiration Date	
Name on Card	
Billing Address	
Cardholder Signature	
Hotel to collect payment for Charges section of this founderstand that a new for	all charges as indicated in the Rate Information and Approve n by processing a charge to the credit card listed above. will have to be completed if guest wishes to extend his/he
Hotel to collect payment for Charges section of this founderstand that a new for	is complete and accurate. I hereby authorize Rooms Tbilis all charges as indicated in the Rate Information and Approved by processing a charge to the credit card listed above. will have to be completed if guest wishes to extend his/heathorized signer of the credit card listed above.
Hotel to collect payment for Charges section of this for understand that a new for stay. I certify that I am the Cardholder name:	all charges as indicated in the Rate Information and Approved by processing a charge to the credit card listed above. will have to be completed if guest wishes to extend his/he