	BEAU-RIVAGE PALACE
	HOTEL RESERVATION FORM
	FINANCIAL TIMES From March 27 to March 29, 2017
	BEAU-RIVAGE PALACE SA
	Place du Port 17-19
	CH – 1000 LAUSANNE 6
	TEL: (+41) 21 613 33 40 FAX: (+41) 21 613 33 41



LAST NA	ME:		FIRST NAME:	
COMPAN	IY:			
ADDRES	S:		COUNTRY:	
E-MAIL:				
T <u>EL NO:</u>			FAX NO:	
ARRIVAL	DATE/TIME:		DEPARTURE DATE/TIME:	
		e tick the relevant box indicated to availability of the pre-re-	ating the hotel and occupancy) eserved room bloc.)	
	-Rivage Palace ssigned upon availabilit	y) 🗌 CHF 430, single	occupancy 🗌 CHF 480, double occupancy	
☐ Angleterre & Résidence Room (assigned upon availability) ☐ CHF 345, single occupancy ☐ CHF 375, double occupancy				
Mondes for Local taxes Angleterre	r the guests staying at the s are at CHF 4.20 per per & Résidence.	Beau-Rivage Palace are incl	st buffet, V.A.T and service charges and access to our spa Cinq uded. ivage Palace and CHF 3.50 per person, per night at the Hotel	
<ul> <li>Check in time is 3:00 p.m. / Check out time is 12:00 noon</li> <li>Cancellations: Cancellations received 1 week (7 days) prior to arrival will not be charged. Any cancellations or partial cancellations received less than 7 days before arrival will be charged 100%. Additionally, no-shows will be charged 100% of entire stay.</li> </ul>				
	ROOM RESE	RVATION & PAYMEN	Γ WILL BE GUARANTEED WITH:	
Visa	Mastercard	American Express	Other	
Card num	ber		Expiry date	
Card Hold	ler's Name		Security Code	
If your credit card is a Visa or a Mastercard you must also send us your 3 digit security code that you can find on the back of your card on the top right-hand side of the signature area.				
Card Hold	ler's Signature			
		this form DIRECTLY by <u>January 20, 2017 -</u> F EMAIL: EVENT	CS@BRP.CH	
	Hotel stamp		Confirmation number	