

**GRAN MELIÁ**  
RESORT  
DON PEPE  
MARBELLA • SPAIN

**HOTEL RESERVATION FORM**

**VII InterEcoForum 1<sup>st</sup> – 2<sup>nd</sup> March 2018, Marbella-Spain**

- ❖ **A block of 10 rooms has been blocked until 1<sup>st</sup> February 2018.** After this date, you may reserve a room subject to availability.
- ❖ **Please submit a separate form for each room required.**
- ❖ The rates are available February 28<sup>th</sup> – March 3<sup>rd</sup> 2018. In case you would like to extend your stay, please check the rates, conditions and availability directly with the hotel.
- ❖ The hotel will acknowledge receipt of your request by fax or e-mail. *This is not a booking confirmation.* The hotel will send booking confirmation within two-three days of your reservation request.
- ❖ **Any changes or cancellations to your reservation must be made in writing to the hotel.**
- ❖ Check in time is 3pm. Check out time is 12pm
- ❖ **Cancellation policy:**
  - **Until 72 hours prior** to arrival date No Charge fee.
  - **Between 72 hours and arrival date** the hotel is authorized to charge 100% of the first night on your Credit Card.
  - **No-shows** In the case of no-shows the hotel is authorized to charge the full amount for all reserved rooms and breakfast each day of the intended stay

**Please send your completed reservation form by fax or email to:**

Fax: + 34 952779954      Email: [comercial.gmdonpepe@melia.com](mailto:comercial.gmdonpepe@melia.com)

If you have questions, please contact

**Sales Department**  
**Gran Melia Don Pepe**  
**Email:** [comercial.gmdonpepe@melia.com](mailto:comercial.gmdonpepe@melia.com)  
**Phone:** 34 952 77 03 00  
**Fax:** 34 952 77 99 54

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For the Attention of: **Sales Department**, Gran Melia Don Pepe

Email to: [comercial.gmdonpepe@melia.com](mailto:comercial.gmdonpepe@melia.com) or Fax to: + 34 952779954

**REQUESTED ROOM TYPE:**

- SINGLE OCCUPANCY · 150€ + VAT (Includes breakfast buffet)  
 DOUBLE OCCUPANCY · 165€ + VAT (Includes breakfast buffet)  
 RED LEVEL SUPPLEMENT 75€ + VAT (Access to our Executive Lounge and VIP Treatment)

**Please type or print guest details in block letters. A separate form for each room is required.**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Mr.  Ms.  Mrs.

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province / State: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Birth date: \_\_\_\_\_

Passport number: \_\_\_\_\_ Expired date: \_\_\_\_\_

**For double occupancy rooms, please provide name of second occupant:**

Last name: \_\_\_\_\_ First Name: \_\_\_\_\_ Mr.  Ms.  Mrs.

**Arrival and Departure dates:**

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Special needs / requests: \_\_\_\_\_

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**PAYMENT METHOD**

Please note that a deposit equal to 50% of your total stay will be charged to the credit card given below. By providing your signature and card details, you agree to the cancellation policy outlined on page 1 of this document.

Visa  Master Card  American Express  Diners Club

Credit card number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Expiration date: \_\_\_\_/\_\_\_\_

Card Holders Name (printed) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_