



INTERCONTINENTAL.
AMSTEL AMSTERDAM

Reservation Form

20th Trade Mission: 'Sustainable business between the Kingdom of the Netherlands, the Caribbean region and Latin America'

Hotel Block code: EDD

Check-in time: 2 p.m.

Check-out time: 12 a.m.

Full Name: _____

ID Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Tel: _____

E-Mail: _____

Roommate (if applicable): _____

Date of arrival: ___/___/2015 _____ Arrival time: _____

Date of departure: ___/___/2015 _____ Departure time: _____

Special requests: _____

Special diet: _____

Please select the roomtype of you preference:

- € 425,00 – Single/Double Executive King Room City View
- € 450,00 – Single/Double Executive King Room River View

All the mentioned rates are including service charge, but excluding breakfast and 5% city tax.

Method of payment

Credit card: AMEX VISA Mastercard

Card No: _____

Exp. Date: _____

Name Cardholder: _____

Billing Address: _____

Signature: _____

*If your travel plans change, please advise us in writing about our cancellation policy. We recommend that your trip insurance cover any unforeseen circumstances and protect against loss of your deposit.

Please e-mail the filled in form to amstel.reservations@ihg.com or via fax to 0031 20 520 3181.

In case you would like to book your room via telephone, please call 0031 20 520 3175 and inform our staff of your blockcode: **EDD** (*office days, from 9.00 – 17.00 hrs, local Amsterdam time*)