



## CASTELLO DI GABBIANO

To make the reservation, please print this form, fill it in, sign and send it via fax to:

**0039 055 8218059 or 0039 055 8218082**

Or you can send us a scanned copy via e-mail: [accommodations@castellogabbiano.it](mailto:accommodations@castellogabbiano.it)

### Conditions

**Cancellation policy:** The reservation can be easily modified or cancelled without a penalty up to 7 days prior arrival (expect for group bookings / events or bookings that exceed Euro 1500). For late cancellations, the entire cost will be charged.

**Check in:** from 2 p.m. – 6 p.m. **Check out:** until 11:00 am. **Payment:** at check out

**Deposit:** A 30% of the total amount is required at reservation for amounts superior than € 1.500,00.

THE CREDIT CARD WILL NOT BE CHARGED, WE WILL JUST CHECK ITS VALIDITY (except for amounts superior to € 1.500,00 for which a deposit of 30% is needed)

**Tourist Tax** Euro 1,50 per night and person (14 years and older) for the first 7 nights.

#### **GUEST INFORMATION**

Full name : \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

#### **ACCOMMODATION**

ROOM/APT. SELECTED: \_\_\_\_\_

CHECK IN (DD/MM/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

CHECK OUT (DD/MM/YY): \_\_\_\_/\_\_\_\_/\_\_\_\_

NUMBER OF GUESTS: \_\_\_\_\_

#### **Special requests:**

\_\_\_\_\_

\_\_\_\_\_

#### **CREDIT CARD**

Credit Card: Visa  Mastercard  American Express

Card# \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Expiration date (MM/YY): \_\_\_\_/\_\_\_\_

**Signature:** \_\_\_\_\_

(Required)