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**Terrapinn Ltd. 2009**  
**Monday 20 – Friday 24 April 2009**  
**HOTEL RESERVATION FORM**

Please send this form to Hotel Okura Amsterdam **before: Tuesday 31 March 2009**

**It is also possible to make a reservation online via <http://www.okura.nl>. Group Code: Terrapinn**

**IMPORTANT:** Please read the following information before completing this form:

- The special conference rate applies only for reservations made with this hotel reservation form.
- Reservations can only be confirmed with a credit card number with valid expiry date.
- In order to avoid late cancellation charges, cancellations must be done in writing by 4pm (16.00 hrs.) forty-eight hours prior to arrival. In case of a no-show or a cancellation within the cancellation period, the full reservation value will be charged. When you cancel by phone, Hotel Okura Amsterdam will give you a cancellation number as confirmation of your cancellation.
- If you check out prior to the booked departure date, Hotel Okura Amsterdam will be entitled to charge you the full reservation value.
- The number of rooms held for conference participants is limited. There is no guarantee of price or availability. After **Monday 9 March 2009**, remaining rooms will be released and the conference rate is not valid anymore. **You are advised to book accommodation as early as possible.**

= Please type =

Family name: \_\_\_\_\_ First name: \_\_\_\_\_  
Organisation: \_\_\_\_\_  
Position in Organisation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Country: \_\_\_\_\_ E mail: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Would like to make the following reservation in Hotel Okura Amsterdam:**

- Standard room for single use at € 235,00 per room per night *Including luxury breakfast buffet*  
 Supplement for double occupancy € 35,00

The above-mentioned rates are per room per night including VAT but excluding 5% city tax.

Arrival date: \_\_\_\_\_ Arrival time: \_\_\_\_\_  
Departure date: \_\_\_\_\_

**GUARANTEE:**

Reservations can only be confirmed with a credit card number with valid expiry date.

VISA       MasterCard       American Express       Diners Club  
Card number: \_\_\_\_\_ Valid until: \_\_\_\_\_ / \_\_\_\_\_  
Card holders name: \_\_\_\_\_

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

Booked by: \_\_\_\_\_ Date: \_\_\_\_\_

**= Incomplete forms might cause delay =**

**ID 1407971**