

ACCOMMODATION REQUEST FORM

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| Name of Guest(s): <i>(Please include all the names of guests staying as this will assist the hotel at with check in, if you do not arrive at the same time.)</i> | |
| Date of Arrival: | |
| Date of Departure: | |
| Hotel Name: | |
| Room Category: a) Double Bedded b) Twin Bedded <i>(2 x single beds)</i> c) Triple Bedded <i>(The Tower Hotel only - 3 x single beds or 1 x double + extra bed)</i> d) Other <i>(please advise)</i> | |
| <p style="text-align: center; margin: 0;">A VALID CREDIT CARD NUMBER, EXPIRY DATE & CVV MUST BE PROVIDED AT TIME OF BOOKING</p> <ul style="list-style-type: none"> Request forms submitted without credit card details cannot be confirmed. Credit Cards details are used as a guarantee with payment to be settled at the hotel on departure or in the event of a cancellation within the cancellation period of the hotel. | |
| Name on Card: | |
| Credit/Debit Card Number: | |
| Expiry Date: | |
| Security/CVV Number: | |

Please complete the accommodation request form and email to Glide Travel: tattoo@protravelinc.com
 Telephone: 0044 (0)203 595 1479 (Monday – Friday 09:00hrs – 18:00hrs).