

## Reservation Form// // SGF/IFW/EQCS

TO:

Steigenberger Airport Hotel  
Reservierungsabteilung  
Unterschweinstiege 16  
60549 Frankfurt

Phone: 069 / 6975 2427

Fax: 069 / 6975 2419

E-Mail: [reservation@airporthotel.steigenberger.de](mailto:reservation@airporthotel.steigenberger.de)

[www.airporthotel.steigenberger.de](http://www.airporthotel.steigenberger.de)

Please reserve by 2008-04-02 the latest. After this date no rooms are available with the below mentioned special room rate.

### Guest name

Last name: \_\_\_\_\_

First name: \_\_\_\_\_

Street: \_\_\_\_\_

Zipcode: \_\_\_\_\_

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

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

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

We want to reserve the following:

Arrival: \_\_\_\_\_

Departure: \_\_\_\_\_

N° of: \_\_\_\_\_

Single room EUR 199.00 per night including breakfast

No of ..... \_\_\_\_\_

Double room EUR 219,00 per night including breakfast

The Contingent is valid until the 02.04.2008.

To guarantee this reservation (**urgently if your arrival is after 6 pm**) we need a credit card information: **The room reservation can be cancelled until one day before arrival exempt from charges.** In case of a later cancellation or "No show" we reserve the right to charge 90 % of the agreed upon room rate.

Credit card institute: \_\_\_\_\_

Credit card holder: \_\_\_\_\_

Credit card number: \_\_\_\_\_

Valid: \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
Date, stamp, signature