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ROOM RESERVATION FORM THIMUN Qatar – 22nd – 25th January 2019

Once all the details below have been completed in full, please either fax or scan and email this form back to reservations. You will receive a written confirmation of your booking within 24 hours.

First Name:		Last Nan	ne:			
Address:		City:		Country:		
Telephone:		Fax:		Email:		
Arrival Date:		Departu	ure Date: _			
Room Type:	Standard Single Room	QR350/-		Standard Twin Roon	n QR400)/-
[Smoking			Non Smoking		
	es quoted are in Qatar Riyal and are unable to provide extras be Arrival Date: : Hourly Shuttle Bus - Complimentary	ed in our Standar		S	Time	
l hereby guar	Credit Card der			our reservation is guar		oha to charge
, .	com charge in the event of no-Sh					
Visa	MasterCard	American Ex	press	Din	ers Club	
INdifiber				From		
Guest Signature			_	Date		
Ar Ar Ca Ca Ca Cr	otel bills are to be settled by the de ny rooms reserved after Friday, 4 th eservation cancelled on or after Frid rd as cancellation charge eservation cancelled on or after Mo edit card as cancellation charge adisson Rewards/Airline Miles are r	lanuary 2019, will b lay, 4 th January 201 nday, 14 th January	9e subject 9 – first 1 2019 – tc	t to future rate and ro night accommodation otal number of nights	will be charged to the	
FOR HOTEL USE						

Confirmation Number:

Radisson Blu Hotel, Doha PO Box 1768, Doha, State of Qatar Tel: +974 4428 1500, Fax: +974 4441 6376 reservations.doha@radissonblu.com radissonblu.com/hotel-doha