



## IAPL '08 – MELBOURNE HOTEL RESERVATION FORM

*Now that you have submitted the online form, please complete the credit card information below to confirm your booking. Please fax this form (or email as attachment) directly to the hotel you have selected, within 48 hours.*

<b>Saville on Russell</b>	<b>Saville Park Suites</b>
Fax: +61 3 9915 2599 <a href="mailto:russellst.res@savillehotelgroup.com">russellst.res@savillehotelgroup.com</a>	Fax: +61 3 9662 3112 <a href="mailto:reservations.melbourne@savillehotelgroup.com">reservations.melbourne@savillehotelgroup.com</a>

### Guest Details:

**Please enter details of the person making the booking (should match that submitted online)**

Last Name:		First Name:		Title:	
Email Address:					
Phone Number:		Fax Number:			
Date of Arrival:		Date of Departure:			
Time of Arrival:		Time of Departure:			

**Please tick the appropriate box and advise Credit Card number.**

Amex       Visa       Mastercard       Diners Card

Name on credit card				
Card Number:		Expiry:		
Billing Address:				
Signature as appears on credit card:				

### Terms and Conditions:

- Prices are in Australian Dollars and inclusive of all taxes.
- One night's accommodation will be debited from the credit card supplied at time of booking.
- Cancellation policy is 21 days prior to arrival date, thereafter; no refunds for the first night payment would be given.
- For no-shows, a fee equivalent total to the first two nights, debited.
- Check-in time is 2.00pm, Check-out time is 10.00am
- Accommodation is subject to availability.

**I agree to the Terms and Conditions of this booking form.**

Signed:		Date:	
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