



BANKER'S ORDER APPROVAL

TO FAX ONCE FILLED IN TO: 00 212 - 23 35 35 21ATTENTION:
EL MORABITINE - EL JADIDA HOTEL – MOROCCO
- Booking service -

Approval of banker's order by credit card

I CONFIRM MY RESERVATION FOR THE FOLLOWING STAY:

ARRIVAL:

Arrival Date: Time:

DEPARTURE:

Departure Date:

DETAILS:

- nights for the price of per night andbreakfast for the price of.....per breakfast
- Category (ies) of rooms
- supplementary bed (s) for the price of per night.

NAME / FIRST NAME(S) of the persons staying at El Morabatine Hotel (Age(s) of children)

.....
.....
.....

BANK INFORMATION:

I undersigned Born on ... / .. /..... in

Holder of the credit card type: (Visa, Eurocard / Mastercard *):

For all the credit cards please join a photocopy of the front and back sides of the ID card or passport of the holder and the credit card.

Card numbers: ----- Expiry date (month / year):-----/-----

Last 3 numbers (on the back of the card above the signature): -----

Authorize ELMORABITINE HOTEL to debit by means of my credit card the deposit ** equivalent to:

.....

I also declare acquainted with the conditions of cancellation below and have accepted them.

Period	Amount to pay
D-1 or no-show ***	100 % of the stay
D-2 to D-15	70 % of the stay
D-16	50 % of the stay

Date: Signature:

(*): Amex not accepted (**): **The deposit amount is not refundable**

(* **): Any customer not showing up before 06:00 am on the day following the declared arrival day is considered as no-show.

ELMORABITINE HOTEL