

TEACHER TRAINING CENTER FOR INTERNATIONAL SCHOOL LEADERSHIP 2015 Institutes LONDON

						SELSDON PARK
	Extra	Night	s Book	ing Fo	rm	SOUTH CROYDON
	Mailing A	Tel: + ddress: 126 Ad	44 (0) 208 657 8	t Hotel & Golf 811 Fax: +44 (anderstead, Sou	Course (0) 208 657 34 th Croydon, S	
For your informati	on, I am a par	ticipant in the	ExPrin Summit in	dicated below an 12-14 July 2		heir group list for:
In addition to the r (at the <u>special P</u>						odation for the following nights
Please select the	e room type:		_			
			Single (priva	ate) room £100/n	night with brea	kfast
Please circle the	requested da		ly 10 🔹 🗖 11	□Ju	ly 14 🔹 🗖	15
Total # of nights		x rate fro	om above	=	£	
~~~ ~~~~	~~~ ~~	\$		~~~~ ~~~	~~~	~~~~~~
My name is:						
Mailing address:						
Fax:		Tel:		Email:		
PAYMENT:						
	STERCARD					
Card Number					Billing P	hone:
Exp. Date	Billing A	ddress				
Cardholder Name					Security C	:ode:
Cardholder Signatur	e					
lf you will <u>be pa</u>	<u>ying with a cr</u> FC	canc <u>edit card that</u> DRM, fax it to	elled <u>24 hours p</u> t you will NOT be the hotel with th	<u>prior to arrival</u> w <u>e bringing to Lo</u> his form and bri	vithout penali <u>ondon</u> , fill ou ing it with you	t the attached THIRD PARTY PAYMENT

Selsdon Park Hotel 3rd Party Payment Form

Please note that this form must be returned Together with a copy of both side of the credit card, to be valid.

To:	Date:	
Company:	Fax	
	No:	

Credit Card Holder's	
Name	
Address	
Type Of Credit Card	
Card Number	
Expiry Date	
Security Code	

The Above Cardholder Will Pay for:

Guest Name	
Confirmation Number	
(optional)	
Specify dates of your	
extra nights	
Rate: £100 (single) or	
£115 (twin)	£ (inc VAT & Breakfast/Room Only)

Charge For:

Room Only	Room &	Extras Only
	Breakfast	
Full Account	Others	

I authorize Selsdon Park Hotel & Golf Club to charge my credit card for the agreed amount.

Approval Signature:_____

Date:

* Please return with your Extra Nights Accommodation Form

Selsdon Park Hotel ExPrin London 2015 Extra Nights Form