

RESERVATION FORM

Date: NOV. 5, 2014

Guest name: [REDACTED]

Guest address: [REDACTED]

Cell phone: [REDACTED]

Number of guest: 1

Arrival date: DEC. 28, 2014

Fight number and arrival time: TBD

Departure date: JAN. 7, 2015

Room categorie: SINGLE ROOM

Rate: 380 EUROS

Total Amount: 3800 + tax

A daily local tax of 5% per room will have to be paid upon departure

Please note that the CHECK IN is from 3:00PM till 8:00PM and that Tropical Hotel's front desk closes at 9:00PM

**TO FILL IN**

⇒ VISA/MASTERCARD (only in €) : [REDACTED]

⇒ Expiration Date : 05/15

⇒ Last 3 digits at back : [REDACTED]

⇒ Card holder name : JEFFREY EPSTEIN

I authorize TROPICAL HOTEL to debit the amount of 3800.00 Euros on my credit card in order to secure my booking and accept your cancellation policy.

⇒ Client signature

