

EXHIBITOR DETAILS			
Company Name			Stand No.
Address			
City	PO Box	Post Code	Country
Contact Name:		Position	
Tel.	Mobile	Fax	
Email	Signature	Date	

RETURN DETAILS	
APPLICATION DEADLINE ASAP	
Attention: Ramesh Brahmanandan Email : travelservices@wfes.ae	
Print	Submit

Hotel Accommodation is at a premium during exhibition times. To ensure your requirements, you are advised to return this form at the earliest convenience as all bookings are subject to availability basis. Please read through the next pages for the list of hotels.

Guest Name			
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Other_____	First Name:	Middle Name:	Last Name:

Hotel Booking (Please select two Hotels from the list below in the order of your preference)						
1st Choice	Hotel Name:	Check-In Date:			Check-Out Date:	
		DD	MMM	YYYY	DD	MMM
2nd Choice	Hotel Name:	Check-In Date:			Check-Out Date:	
		DD	MMM	YYYY	DD	MMM
Hotel Room Preferences						
<input type="checkbox"/> Single		<input type="checkbox"/> Double		<input type="checkbox"/> Non-Smoking		<input type="checkbox"/> Smoking

PREFERENTIAL ROOM RATES FOR EXHIBITORS, DELEGATES & VISITORS VALID FROM 14 to 21 JANUARY 2017

HOTELS	NO OF STARS	ROOM RATES IN USD PER NIGHT		BREAKFAST Include	DISTANCE FROM ADNEC	FREE WIFI
		SINGLE	DOUBLE			
Hyatt Capital Gate Abu Dhabi	5* Luxury	360	390	Yes	On-Site Hotel	Yes
Fairmont Bab Al Bahr Abu Dhabi	5*Luxury	215	235	Yes	5 min by car	Yes
Hilton Capital Grand Abu Dhabi	5*	285	300	Yes	5 min by car	Yes
Aloft Hotel Abu Dhabi	4*	315	345	Yes	On-Site Hotel	Yes
Premier Inn Abu Dhabi	3*	180	195	Yes	On-Site Hotel	Yes
Holiday Inn Abu Dhabi	4*	225	240	Yes	5 min by car	Yes
NOVOTEL Al Bustan Abu Dhabi	4*	195	215	Yes	5 min by car	Yes
Traders Hotel Qaryat Al Beri Abu Dhabi	4*	175	180	Yes	5 min by car	Yes
NOVOTEL Abu Dhabi Gate Hotel	4*	120	130	Yes	10 min by car	Yes
Ibis Hotel	3*	95	105	Yes	10 min by car	Yes

As of 1st June 2016, an additional municipality fee of AED 15 net per night per room to be paid directly by the guests upon check-out

General remarks: -

- Rates are per room per night, inclusive of taxes (currently 20% (10% service charge, 6% tourism fees and 4% municipality fees) and breakfast
- Room in standard entry category of the mentioned hotel. High categories rooms are available upon request.
- Roundtrip transfers from and to Abu Dhabi & Dubai airports available at special rates upon request
- Arrival & departure dates falling before or after the above mentioned dates will be subject to availability & charged at best available rate.

Above rates do not include:

- **Visa Service at 110 per person, please refer to FORM 26**
- **Flight booking service**, special fares are available for WFES 2017 Delegates, Exhibitors and Visitors, **please refer to FORM 25**
- Luggage handling at the airport and portage at the hotel
- Insurance (assistance, cancellation, luggage, etc.) Travel insurance can be purchased through Al Masaood and must be pre-arranged prior the travel date.
- Personal expenses (telephones, minibar, etc.)

Transfer Requests			
Arrival Date:	Time:	Flight No.:	Airline Name:
Departure Date:	Time:	Flight No.:	Airline Name:

TRANSFERS COSTS – max 2 pax:

Transfer from Abu Dhabi Airport to Abu Dhabi Hotel	USD 50
Transfer from Dubai Airport to Abu Dhabi Hotel	USD 120
Transfer from Abu Dhabi Airport to Dubai Hotel	USD 120
Transfer from Dubai hotel to ADNEC	USD 120

Note: the driver will wait for you at the airport's arrival area upon your arrival. Please look for your name carefully on the sign board. Transfers by minivan, buses are available upon request.

PAYMENT OPTIONS

You will receive an **INVOICE** with the hotel booking details, terms & payment via e-mail within 24 - 48 hours of submitting this form.

Bank Transfer	
Account Name:	AL Masaood Travel & Services
Bank:	National Bank Of Abu Dhabi - REAL ESTATE & FAMILY CONGLOMERATE
A/C No:	0150-656-294
IBAN	IBAN No :- AE520350000000150656294 BIC :- NBADAEACPU
Swift Code:	NBADAEACPU

Credit Card Payment
Please complete the attached Credit Card Authorization Form

CREDIT CARD AUTHORISATION FORM

All information provided herein will have to be handled strictly on a confidential basis by the receiver.

This is to provide my / our company credit card details to pre-pay the reservation / services made by me / our company under the name of _____

For (service description) _____

From the (date) _____ To the (date) _____

Against Invoice Number _____ dated _____

CREDIT CARD PAYMENT

THIS IS TO AUTHORISE: **AI MASAOD TRAVEL & SERVICES**

To charge _____ (net) / (Plus _____ % service charge, _____ % tax)

For a maximum total of _____ against

(This is a one-time charge authorization only)

CREDIT CARD TYPE: _____

CREDIT CARD NO.: _____

CARDHOLDER NAME: _____

EXPIRY DATE: _____

SIGNATURE OF CARD HOLDER: _____ **DATE :** _____

BILLING ADDRESS: _____

(PLEASE, ATTACH A COPY OF BOTH SIDES OF THE CREDIT CARD)