

P.O Box 1703 / 1 Sibaya Drive
Umhlanga Rocks 4320



Reservations:

Tel: 031 580-5299/5290/5291/5292/5108/5162

Fax: 031 580-5046

E-mail: DL-SB-Res@suninternational.com

Vat Registration : 4040210785

BOOKING INFORMATION : SIBAYA LODGE
DMISA CONFERENCE: 14 - 19 SEPTEMBER 2014

| | | | |
|--|---|---|--|
| NAME & SURNAME | | | |
| PERSON SHARING-NAME | | | |
| ADDRESS | | | |
| POSTAL CODE | | | |
| SELECTED OPTION | | | |
| TELEPHONE (W) | | | |
| FAX NUMBER | | | |
| CELL PHONE NUMBER | | | |
| ARRIVAL DATE (CHECK- IN FROM 14:00) | | DEPARTURE DATE (CHECK- OUT AT 10:00) | |
| OPTION 1 | <u>STANDARD SINGLE ROOM: (1 Double Bed)</u> R1407.00 Single,per room per night (Single Room maximum 1 GUEST per room) | | |
| OPTION 2 | <u>STANDARD DOUBLE ROOM: (2 Double Beds)</u> R 1535.00 Double, per room per night (Double maximum 2 GUESTS per room) | | |
| SPECIAL REQUESTS | | | |

The above rates are per night and are inclusive of VAT and Breakfast, **INCLUDE 1% TOURISM LEVY, ARE NETT & NON COMMISSIONABLE, ARE VALID FOR THE ABOVE PERIOD ONLY.**

DO YOU NEED TRANSPORT FROM THE AIRPORT TO THE LODGE? YES: _____ NO: _____

Please confirm tariff with Lodge Reservations. If yes, your lodge accommodation account will automatically be debited with the quoted amount.

ARRIVAL DATE: _____ FLIGHT NUMBER: _____ ARRIVAL TIME: _____

DEPARTURE DATE: _____ FLIGHT NUMBER: _____ DEPARTURE TIME: _____

PAYMENT

In order to facilitate your pre-planning and for Sibaya Lodge to guarantee your reservation, reservations should be guaranteed with a valid credit card number or full pre-payment. Payment can be made directly into the hotel bank account. The hotel's banking details are at the bottom of the form. # Once payment has been processed, kindly fax a copy of the bank slip along with a signed copy of this confirmation to **(031) 580-5046**.

In order for the credit card to be charged we do require a copy of the front and back of the credit card as well as a copy of the identity document of the card holder.

To secure your booking, payment for the first night must be done in full either via credit card or bank payment.

All "extras" to be settled on departure from the Lodge.

Rooms are only allocated on day of arrival, therefore specific rooms cannot be guaranteed. 'check in' time is strictly from **14H00** on the day of arrival and "check out" time is by no later than **11H00** on the day of departure.

CREDIT CARD AUTHORISATION

I, _____ hereby authorize the Sibaya Lodge to debit my credit card for the amount of R_____ being a deposit / full payment in order to secure/ guarantee my reservation. In the event of non-arrival without prior notice, the full amount will be charged against my card.

Full Name & Surname: _____

Passport/ID no.: _____

Card type: **VISA** _____ **MASTER CARD** _____ **DINERS CLUB** _____ **AMERICAN EXPRESS** _____

Card no: _____

Last 4 digits of the card: _____ Expiry Date: _____

Signature: _____

Date: _____

Cancellation policy: In the event of cancellation, rules shall apply. (As per below)

Cancellation Policy

1. Cancellation should be 7 days prior to arrival for a full refund. Should the cancellation date be within the 7 days, A cancellation fee will be charged which will be one (1) night payment in full.

Banking Details

Account Name : Afrisun Kzn Pty Ltd T/A Sibaya casino and entertainment kingdom
Name of Bank : Nedbank
Account Number : 1454029099
Branch Number : 145405
VAT Number : 4040210785