

AUTHORISATION FORM

FROM: _____

FAX No.: _____

DATE: _____

To:

Villa Notos

Ioannis Anestis

Tel: +30 22870 28200

Fax: +30 22870 22193

Full Name: _____

Type of Credit Card: _____ (Visa or MasterCard)

Card Number: _____

Expiry Date: _____

Check Digits: _____ (The last 3 digits, at the back of your card, upon your signature)

€ Amount: _____

I authorise Ioannis Anestis to charge my credit card with the above amount, as a deposit for the reservation of one _____ (standard/ superior/deluxe/ penthouse apartment) from the ____/____/____ to the ____/____/____.

I m aware, that if I cancel this booking in less than 21 days before the arrival date, this deposit will not be refunded and if I do not show up at the hotel on the arrival date I agree to be charged fully for all accommodation charges.

Your name & signature