

CHRISTMAS DAY LUNCH 2021 – BOOKING & PAYMENT FORM

Guest Name: \_\_\_\_\_

Phone Number & Email: \_\_\_\_\_

Booking Time: (circle one)      1100-1300      1330-1530

Number of Guests: ADULTS: \_\_\_\_\_ CHILDREN 0-5 years: \_\_\_\_\_ CHILDREN 6-15 years: \_\_\_\_\_

ACCOR PLUS MEMBER? (circle one) YES / NO      *If yes, provide membership number.* \_\_\_\_\_

DIETARY & OTHER REQUIREMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby authorise a PAYMENT of \$ \_\_\_\_\_ relating to this booking to be:

**A. Debited from my CREDIT CARD**

Credit Card Type (please circle one)      VISA      AMEX      DINERS      M/C      JCB

Card Number \_\_\_\_\_

Expiry Date \_\_\_\_\_ / \_\_\_\_\_

Card Holders Name \_\_\_\_\_

Card Holders Signature \_\_\_\_\_

*Please note that all credit cards will attract a transaction fee of 1.3% of the amount to be charged.*

**B. EFT TRANSFER**

Bank      NAB

Account Name      QP Management Pty Ltd T/A Novotel Langley Hotel

BSB      082 057

Account Number      846203821

Payment Date \_\_\_\_\_

Payment Amount \_\_\_\_\_

Reference Number \_\_\_\_\_

Please complete, sign and return to: Novotel Perth Langley Sales Office [h1764-sb2@accor.com](mailto:h1764-sb2@accor.com)

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_