



FIRST NAME :

ADDRESS :

PHONE NUMBER :

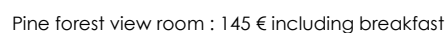
E-MAIL ADDRESS :

Upon availability, your booking is not guaranteed until you receive a written confirmation from the hotel



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Fax : +33 (0)4.42.01.96.31
E-mail: cassitel@hotelcassis.com

☐

Fax : +33 (0)4.42.01.01.32
E mail : larade@hotel-cassis.com

ARRIVAL DATE : ____/____/____

DEPARTURE DATE : ____/____/____

NUMBER OF PERSON(S) : _____

CREDIT CARD NUMBER : _____

EXPIRY DATE : ____/____/____

SECURITY CODE :

DATE AND SIGNATURE :

DATE AND SIGNATURE: