

SAPOA CONVENTION 2024
01 - 05 September 2024
ACCOMMODATION RESERVATION FORM

How to make your reservation:

- Option 1 Email the form on the reverse of this page to grpresv@suninternational.com
Option 2 Contact our Sun City reservations on 014 557 1000 OR email sctyres@suninternational.com

- You will receive written confirmation of your booking within 24 hours.

How to pay for your reservation:

Please note that FULL PREPAYMENT for any accommodation booked is required within 10 days of making your booking, alternatively your booking will be released.

Option 1: Credit Card

- Fax or email the credit card form on the reverse of this page to Group Reservations on + 27 (0) 11 780 7596 or to grpresv@suninternational.com

Option 2: Direct Deposit

- If you do not have a credit card, you will be required to make a cash deposit into Sun International's bank account within 10 days of making the reservation, alternatively your booking will be released.
- Fax your deposit slip to the Advance Deposit Manager at +27 (0) 11 780 7168.
- Please include your reservation number and contact telephone number on the deposit slip.

Banking Details:

Sun International Management Limited c/o Local Advance
Deposits Nedbank, Sandton Branch, 198 765, Current
Account Number: 120 786 4226

Terms and Conditions:

- Accommodation will be allocated on a 'first come, first served' basis. On arrival at your hotel, you will be required to provide a credit card guarantee or cash deposit, to cover charges you may incur over and above your accommodation.
- The rates quoted are net, per room, per night including Bed & Breakfast, tourism levy and 15% VAT.
- There is a minimum of 2 nights stay over the weekend, i.e., Friday and Saturday. No arrivals or departures on Saturdays allowed
- These rates are valid for the period of the **SAPOA CONVENTION 2024** Only.

Cancellations:

- A cancellation made 7 days prior to arrival date will entitle you to a full refund of the amount paid, upon written request faxed to the Advance Deposit Manager on +27 (0) 11 780 7168.
- A cancellation made within 7 days of arrival date will result in the forfeit of one night's accommodation including the relevant taxes.
- In the event of a "no-show" the full package price will be retained.
- For sub blocks please see Terms & Conditions on your pro forma invoice.

01 - 05 September 2024

ACCOMMODATION RATE SCHEDULE

Closing date for Accommodation Reservations: ONE MONTH BEFORE

| LOCATION | ROOM TYPE | GROUP ID | RATES | |
|----------------|----------------------|--------------|------------|------------|
| | | | Double | Single |
| Sun City Hotel | Standard Twin Room | SAPOAC2401PB | R 3 200.00 | R 2 923.00 |
| | Standard Family Room | | R 3 753.00 | R 3 476.00 |

GUEST INFORMATION (Please Print)

Please read the Terms & Conditions and sign in the space provided below in acceptance thereof

| | | | | | |
|---------------------------------|--|----------------|--|---------------------|--|
| Surname | | Name | | Title | |
| Partner's Surname | | | | Title | |
| Postal Address | | | | | |
| | | | | Postal Code | |
| Facsimile | | | | | |
| Email | | Tel (B) | | Tel (H) / Cellphone | |
| Arrival Date | | | | | |
| Group ID | | Departure Date | | | |
| Special Requests / Instructions | | | | | |
| Guest Signature | | Name | | | |

GROUP INFORMATION (Please Print)

Please read the Terms & Conditions and sign in the space provided below in acceptance thereof

| | | | | | |
|---------------------------------|------------------|---------|------------------|----------------------|-------------|
| Company Name | | | | | |
| Postal Address | | | | | |
| | | | | | Postal Code |
| Facsimile | | | | | |
| Email | | Tel (B) | | Tel (H) / Cell phone | |
| Number of Rooms | Double Occupancy | | Single Occupancy | | |
| | | | | | |
| Arrival Date | | | | | |
| Group ID | | | Departure Date | | |
| Special Requests / Instructions | | | | | |

AUTHORISATION FOR USE OF CREDIT CARD

I, Mr/s _____ hereby give authorisation to SUN INTERNATIONAL to

DEBIT my credit card for the amount of R _____

(amount in words) _____

This amount is for accommodation pre-payment/s for the following reservation/s:

CARD TYPE: _____ EXPIRY DATE: _____ CVC AUTH No (3 digits) _____

CARD NUMBER: _____

CARD HOLDER'S FULL NAME: _____

CARD HOLDER'S I.D NUMBER: _____

CONTACT TELEPHONENUMBERS: TEL: _____ CELL: _____

EMAIL ADDRESS: _____

COMPANY NAME: _____

POSTAL ADDRESS: _____

CARD HOLDER'S SIGNATURE: _____ DATE: _____

Please fax or mail completed details to Group Reservations on Fax +27 (0) 11 780 7596 or email grpresv@suninternational.com

- It remains the responsibility of the Card Holder to verify if this authorisation has been received and processed onto the correct reservation.
- Reservations where card payments have been declined by Card Division, will be cancelled.
- Cancellation of reservation made 7 days prior to arrival date will entitle you to a full refund of the moneys paid, upon written request faxed to the Advance Deposit Manager on +27 (0) 11 780 7168 or email payments@suninternational.com
- Cancellation of reservations made within 7 days prior to the arrival date will result in a cancellation fee of the first night's accommodation being charged.

Thanking you,

ADVANCE DEPOSIT MANAGER