



The following accommodation rates are available to the guests attending the  
**Power Ball @ Hilton Park Lane Hotel**  
**Friday 13th November 2020**

<b>Hilton Park Lane:</b>	£324.00*	Standard
	£354.00	Deluxe
	£384.00	Executive with lounge access
<b>The Grosvenor Hotel, 101 Buckingham Palace Road:</b>	£250.00	Standard
<b>Washington Mayfair, 5 Curzon Street, W1J 5HE:</b>	£240.00	Standard
<b>Chesterfield Mayfair, 35 Charles Street, W1J 5EB:</b>	£235.00	Standard

All rates are inclusive of **Bed & Breakfast, Vat @ 20% and Service Charge for two people per room per night**

*Note: Bookings need to be made as soon as possible in order to guarantee the availability and rate - no later 13th October 2020. The cancellation policy for the hotels above is 7 days prior (prior to 12.00 noon on 6<sup>th</sup> November 2020) With the exception of Hilton Park Lane\* - cancellation policy of 21 days prior to arrival (prior to noon on 23rd Oct 2020)*

*For Extra nights, Upgrades and interconnecting rooms – please contact Best Options.*

**TO MAKE A BOOKING:** Please complete the following and fax back or email to:  
 Account Manager – Ref: EIC Lon20 Best Options  
 Tel: 08456 210214 Fax: 08456 210216 **Email: [alison@bestoptions.co.uk](mailto:alison@bestoptions.co.uk)**

**CONTACT NAME:** .....

**COMPANY NAME:** .....

**Contact Tel. Nos. : Wk:** ..... **Mobile:** .....

**Email Address:** .....

**Number of Rooms:** ..... **Preferred Hotel** .....

**Type:** **Double or Twin Occupancy** **Standard / Deluxe / Executive**  
 If booking multiply rooms (please complete the 2<sup>nd</sup> page)

**Guest Name:** .....

**Bookings will be provisionally made. In order to guarantee your booking(s), we shall require a credit card number and then you will receive confirmation. The final account will need to be settled on departure at the hotel or in advance.**

<b>Card Number:</b>				XXXX Last 4 digits We will call for this
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Expiry Date:..... Card Holder Name: .....

*It is assumed that if you returned the form that you are happy for the above information to be shared with the third party above and that Best Options can store your details. If not – please advise.*



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**COMPANY NAME:** .....

<i>Guest Names</i>	<i>Room Type</i>	<i>Account Instructions</i>	
		<i>Bed &amp; Breakfast</i>	<i>Other Charges</i>
	<i>Double / Twin Std / Del / Exe</i>	<i>Company to pay Or Guest to pay</i>	<i>Company to pay Or Guest to pay</i>
	<i>Double / Twin Std / Del / Exe</i>	<i>Company to pay Or Guest to pay</i>	<i>Company to pay Or Guest to pay</i>
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	<i>Double / Twin Std / Del / Exe</i>	<i>Company to pay Or Guest to pay</i>	<i>Company to pay Or Guest to pay</i>

*Payment by a Pro-forma Invoice - please complete:*

*Company Address:*.....

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*Payment by Third Party Credit card: please complete:*

**Full name of the person responsible for the payment (this person will receive the payment link)**

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**Email address:** .....

**Phone number:** .....