



SAICA CONFERENCE 2024 12 - 15 SEPTEMBER 2024

ACCOMMODATION RESERVATION FORM

How to make your reservation:

Option 1Email the form on the reverse of this page to grpresv@suninternational.comOption 2Contact our call centre on 011 780 7830.

• 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 <u>grpresv@suninternational.com</u>

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 SAICA CONFERENCE 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.

12 - 15 SEPTEMBER 2024

ACCOMMODATION RATE SCHEDULE Closing date for Accommodation Reservations: A MONTH BEFORE

| LOCATION | ROOM TYPE | GROUP ID | RATES | | |
|-------------------|----------------------|-------------|------------|------------|--|
| | 1112 | שו | Double | Single | |
| CABANAS HOTEL | Standard Family Room | SAICA2402PB | R 3 410.00 | R 3 170.00 | |
| SUN CITY HOTEL | Luxury Twin Room | C47C4240400 | R 4 169.00 | R 3 894.00 | |
| | Luxury Family Room | SAICA2401PB | R 4 823.00 | R 4 548.00 | |

GUEST INFORMATION (PleasePrint)

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

| Surname | Name | | | | Title | |
|------------------------------------|-------------------|-------------|-------|------------------------|---------------------------------------|--|
| Partner's Surname | Partner's Surname | | Title | | | |
| Postal Address | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | Postal Code | |
| Email | Tel (B) | | | Tel (H) / Cellphone | | |
| Arrival Date & Room Type | | | | | | |
| Group ID | | Departure D | ate | | | |
| 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 |
| Email | | Tel (B) | | | Tel (H) / Cellphone | | |
| Number of Rooms | Double Occupancy | | Single Occupancy | | | | |
| | | | | | | | |
| Arrival Date & Room Type | | | | | | | |
| 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 | e-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: T | EL: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 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 DEPARTMENT