



OCTOBER 27-29, 2022  
30TH WORLD CONGRESS  
WESTIN PLAYA BONITA - PANAMA CITY

THE WESTIN  
PLAYA BONITA  
PANAMA

### Individual Booking Form

#### Accommodation Arrangements:

All guests attending the World Congress will receive ISHRS Group Rates as follows :

DELUXE OCEAN VIEW SINGLE OCCUPANCY \$180 per room, per night

DELUXE OCEAN VIEW DOUBLE OCCUPANCY \$180 per room, per night

*The rate is subject to Tourism Tax: 10% on room rate.*

**Room Rate Inclusions:** Daily Breakfast buffet at Restaurant and complimentary wifi.

**Extra person policy:** There is no extra fee for children under 12 years of age when sharing with parents. A maximum of 3 adults or 2 adults and 2 children (age 13 and under) are permitted per room. Each additional adult in room will have a surcharge of USD\$25.00 per night. Plus 10% of tax.

**Check-in / Check-out:** Check-in is possible as of 15:00 hrs and check-out is required by 12:00 hrs noon. Arrange directly with the Hotel should your requirements differ.

#### How to book:

For more information or to make a reservation complete this form and send it to the following email:  
[groups.wpb@westinplayabonita.com](mailto:groups.wpb@westinplayabonita.com)

#### How to pay & guarantee your accommodation:

All accommodation expenditures will be charged upon departure. However, you are requested to guarantee your reservation by Credit Card and one night charge at the time of reservation.

**Cancellation Clause:** Cancellation of Reservations may be made up to 7 days before the arrival date, by 6:00PM on the day of cancellation, without charge; your deposit will be fully refunded.

If you cancel within 7 days of your arrival date or "no show" you will be charged for one night only, forfeiting your one night deposit.

#### PLEASE MAKE A RESERVATION AS FOLLOWS:

Today Date: \_\_\_\_\_

Title: \_\_\_\_\_ First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Accompanying person: \_\_\_\_\_

Address for all correspondence: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Single room

Double room

Arrival date: \_\_\_\_\_

Departure date: \_\_\_\_\_

My credit card details are (tick appropriate):    **Mastercard**      **Visa**    **Amex**

Card number: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Name shown on card: \_\_\_\_\_

Cardholder's billing address: \_\_\_\_\_

#### DECLARATION OF CONSENT:

I understand and accept the cancellation clause explained above and authorize the Hotel to charge my credit card if I may incur in penalty.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_