

ACCOMMODATION

Thursday 14 September to Saturday 16 September 2017

(Some rooms available for the nights of Tuesday 12, Wednesday 13 and Saturday 16 September)

Booking Form for the MIDLAND HOTEL ONLY

Please complete this form and return to the BOS Office, 12 Bridewell Place, London EC4V 6AP

Phone: 020 7353 8680 Fax: 020 7353 8682 E-mail: ann.wright@bos.org.uk

Please note that booking for the Midland Hotel is not available on line but you can download this booking form from the BOS website www.bos.org.uk

Name _____ Title _____

Address _____

Daytime phone number _____ E-mail: _____

Arrival day and date _____ Departure day and date _____

Number of nights _____ Special Requirements _____

Prices are per room, per night. You will automatically be allocated a superior room if there are no standard rooms available. Please advise if this is not acceptable.

Rates include Bed, full English breakfast, complimentary Wi-Fi and VAT at 20%.

Complimentary use of the gym, poolside and thermal area available to all guests. Please visit the Midland Hotel website to view their facilities - <https://www.ghotels.co.uk/our-locations/the-midland-manchester/>

Single occupancy of a standard/twin double room £150 per night

Single occupancy of a superior twin/double room £180 per night

Double occupancy of a standard twin/double room* £165 per night

Double occupancy of a superior twin/double room* £205 per night

*Indicate whether twin or double (if available) required please

Please give name of person(s) sharing _____

The Midland Hotel does not have its own car park, however, parking is available at the NCP Manchester Central.

Please give below your credit card details to confirm your booking. This information will only be used if you do not use the accommodation booked above and do not cancel it by 1 July 2017. The hotel reserves the right to charge the Society for accommodation cancelled after 1 July 2017 if all or part of the nights booked cannot be re-sold. Contact the BOS office for all cancellations and amendments.

Credit Card details: VISA or MASTERCARD (Please indicate which)

Name on card _____

Signature _____ Date _____

Card No _____ Expiry Date __/__/__ 3 digit SN _____

Address used for card _____