

Business Partner Information Form

Dear Business Partners,

Please complete this form with your company's information. This data will be used to initiate our partnership and for any other mutually agreed-upon purposes.

Thank you for your cooperation.

| Contact Information | |
|--|--|
| Company name (Legal Business Name) | |
| Business Partner Code | Don't fill out |
| Registered office address | Street |
| | City |
| | Postal code |
| | Country |
| Company registered in the Commercial register: | |
| Statutory representative(s) name + surname: | |
| Business ID No. (IČ) | |
| VAT No. (DIČ) | |
| IATA No. | |
| Contact person (name + surname) | |
| Telephone | |
| Mobile | |
| E-mail address | |
| Bank details | |
| Bank name and address | |
| Bank account | |
| IBAN | |
| SWIFT | |
| Cancellation fee: | Up to 28 days prior: 0% |
| | 27 to 7 days prior: 20% |
| | 6 to 1 day prior: 40% |
| | No-show (without prior cancellation): 100% |
| Deposit & commission: | Our deposit policy requires full prepayment (100%) to secure a booking. Please ensure deposit is paid no later than 21 days prior to arrival. A 20% commission is offered on all prepaid bookings. |