

## Dear parent or legal guardian,

Please fill out and sign this form to:

- give permission for your child to enter into a contract with Hotel Samos to make a reservation and stay as a paying guest without your presence
- agree to assume full responsibility for your child and his/her actions during his/her stay at Hotel Samos
- accept that Hotel Samos has the right to eject your child from the premises if his/her behaviour is unreasonable and/or infringes on the rights of other guests.

Submit copies of this signed form and your valid passport (name and signature clearly visible) by:

- emailing them to info@hotelsamos.com before arrival, OR
- providing printed versions for your child to present at check-in.

## **Required** information

## Clearly write all information in block capitals.

Booking reference number	
Travel provider/agency	
Lead passenger name	
Dates (dd/mm/yy)	From// to//
Full name (minor)	
Full name (parent/legal guardian)	
Relationship to minor	
Contact telephone/mobile	
Contact email	
Signature	
Date (dd/mm/yy):	