



## Best Rate Guarantee Form

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

Guest Information: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Post Code: \_\_\_\_\_

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

Preferred Contact Method: \_\_\_\_\_

### Hotel Reservation Information

Hotel: \_\_\_\_\_

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

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

Confirmation Date: \_\_\_\_\_ Confirmation Number: \_\_\_\_\_

Quoted Third Party Rate: \_\_\_\_\_

Location of Quoted Rate: \_\_\_\_\_

Supporting Document Submitted: \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Instructions:

To submit a claim under the **Best Rate Guarantee**, please:

1. Download and complete this form within 24 hours of making your reservation.
2. Fax the completed form and screen shot or advertisement with the lower rate to **01254 267474**.

If you have any questions please email [best.rate@shirehotels.com](mailto:best.rate@shirehotels.com)