

Bologna, 24-26 september 2003

Hotel reservation and tourist form

This form is to be filled in and sent, by and not later 1° september 2003 to:

Bologna Congressi Convention and Travel Piazza Costituzione 5/e 40128 Bologna

Tel. 051 6375111/6375122

Fax 051 6375149

E-mail: info@conventionandtravel.it

sropa@conventionandtravel.it

Name and Surn	ame:				
Address:					
Phone		Fax		E-mail:	
2 770 770 7					
DEOUEST OF	HOTEL DECEDIATION	237			
	HOTEL RESERVATION				
Arrival date	:.	Flight numbe	r		
departure date:		Flight number	•		
n. of nights:					
☐ Single room	<i>ı</i> : n	\square Twin room: n			
\square Double for s	single use: n				

Hotel class	Single rate in € (rates per night)	Double rate in € (rates per night)	Double for single use in € (rates per night)	
5 stars		€314,00	€248,00	
4 Stars	From € 97,00	From €140,00	From €138,00	
	To €120,00	To €220,00	To €170,00	
3 stars	From € 93,00	From €115,00	From €105,00	
	To € 130.00	To €190.00	To €150.00	

Reservations will be accepted on a "first come, first served" basis.

Daily room rate, bed and breakfast, tourist tax included

The payment corresponding to the first night of room booked plus Euros 13,00 as agency fee

<u>The booking will become valid upon receipt of the deposit and agency fee</u>. Convention and Travel will afterwards send hotel confirmation voucher with the name of the hotel and indication of the payment made



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1.	Hotel deposit correspon	•••••						
2.	Agency fee: Euros 13 f							
	Total amount				*****			
Pay	ment terms:							
	Bank transfer on the following current account number: no. 313/9 in the name of Bologna Congressi SpA CAB Code 2407 – ABI Code 6385 Bank: Cassa di Risparmio in Bologna Branch: Fiera Piazza Costituzione 8, 40128 Bologna (Italy) Please join a copy of your bank transfer to the hotel booking form							
☐ Credid card payment by Visa, Eurocard or Mastercard is accepted. We regret not to be able to acc Express or Diners.								
	I authorize to charge n □ Visa	ny credit card as follo Burocard	ws:: □ Mastercard	□ _{Cartasì}				
Nar	ne of the holder	:						
Credit card numbers Exp. date Authorized amount Signature		:						
In cassi We this	ured after this deadline. hereby inform you that, form will be collected in we mentioned law, for the tyou are entitled to exer	All refunds will be arn in conformity with arn n a data bank and may e purposes of commen	2003, a refund will be made canged after the conference t. 10 of Italian Law n. 675/9 be processed, also making ccial information and anony ified in article 13 of the abo	6, the information yo use of third parties in mous statistical proce	u provide by filling in n compliance with the			