

# SISPAD

Bologna, 6-8 September **2011**

## ROYAL HOTEL CARLTON

Fax +39 051 249724

e-mail: carlton@monrifhotels.com

### HOTEL RESERVATION FORM

Name \_\_\_\_\_ Family Name \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_ City \_\_\_\_\_ State/Country \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

*Saturday Sept. 4 night:* Double room /single use € 114,00

Double room € 144,00

*From Sept. 5 on:* Double room /single use € 135,00

Double room € 165,00

single room (dus)

double room

Arrival Date \_\_\_\_\_ Leaving Date \_\_\_\_\_ no. of nights \_\_\_\_\_

Name of the accompanying person \_\_\_\_\_

### PAYMENT

To guarantee your reservation, please fill in with your credit card data (The hotel will charge the cost of one night)

The reservation form without the credit card data will not be accepted.

Visa  Mastercard  Diners  American Express

Name on the credit card \_\_\_\_\_

Card number \_\_\_\_\_ exp. Date \_\_\_\_\_

The Hotel will remit the relative invoice after payment directly at the Reception Desk of the Hotel

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