

SISPAD

Bologna, 6-8 September **2011**

HOTEL INTERNAZIONALE

Fax +39 051 249544

e-mail: internazionale@monrifhotels.com

HOTEL RESERVATION FORM

Name _____ Family Name _____

Address _____

Zip Code _____ City _____ State/Country _____

Phone _____ Mobile _____

<i>Saturday Sept. 4 night:</i>	Double room /single use	€ 80,00
	Double room	€ 99,00
<i>From Sept. 5 on:</i>	Double room /single use	€ 99,00
	Double room	€ 115,00

single room (dus) double room

Arrival Date _____ Leaving Date _____ no. of nights _____

Name of the accompanying person _____

single room (dus) double room

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 _____