Hotel booking form

(To be sent to Organizing Secretariat: ART.4)

We have made reservations for you at several hotels close to the Congress location. If you wish, you can book your accommodation at the hotels listed below **no later than May 10th, 2004**, by filling in the booking form and sending it to: **Organizing Secretariat: ART.4 – via Altabella, 3 – 40126 Bologna – Tel. +39 051 2966111 – Fax + 39 051 2966130 – E-mail art4@art4.it**

Hotel booking request:

Surname .....

First name .....

Telephone ..... Fax ..... E-mail .....

Please tick the relative boxes to indicate the Hotel and the type of room you would like:

	**** COMMERCIANTI		***S OROLOGIO		*** TOURING		*** UNIVERSITY		*** HOLIDAY	
Type of room	**No. of rooms**	**Tariffs applied Eur.**	**No. of rooms**	**Tariffs applied Eur.**	**No. of rooms**	**Tariffs applied Eur.**	**No. of rooms**	**Tariffs applied Eur.**	**No. of rooms**	**Tariffs applied Eur.**
Single				**135,00**						
Double for one person		**180,00**		**155,00**		**130,00**		**60,00**		**60,00**
Double		**215,00**		**180,00**		**180,00**		**80,00**		**80,00**
GARAGE (1 car x night)		**26,00**		**26,00**		**21,00**				

The tariffs are per room per night and include buffet breakfast.
Cancellations must be sent in writing to ART.4. There is no penalty for cancellations sent before 14th May 2004. After this date the cost equivalent to 1 **night** at the confirmed hotel will be charged to the credit card given as guarantee of payment.
The booking requested will be confirmed on a first-come-first served basis. The organiser will be unable to guarantee hotel accommodation after 10th May 2004, although every effort will be made to meet late requests.

Arrival date.....… Departure date..... No. of nights……

Please fill in the form below to reconfirm your booking with your credit card details:

Visa/Mc/Diners/Amexo|__|__|__|__|__| |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Expiry date month |__|__| year |__|__| (4 nos. at top right) |__|__|__|__|

Signature Owner for authorization _____

I, the undersigned, certify that I have read and hereby accept the conditions of reservation and cancellation.

Signature

_____

Date