HOTEL-BANQUET RESERVATION FORM - AH2000

PLEASE SEND FORM TO:
Trentino Holidays - Via Solteri 78, 38100 Trento - Italy, by fax: +39-0461-830215 or 825657.

Write or type in BLOCK LETTERS

First Name _____ Last Name _____

Country _____

Phone number :_____ Fax Number _____

E-mail: _____

HOTEL LIST	**Single room**		**Double room**		**Double room with single occupancy**	
(1° choice)	**Italian Lire**	**EUROS**	**Italian Lire**	**EUROS**	**Italian Lire**	**EUROS**
Accademia****	❑ 130.000	67.14	❑ 105.000	54.23	❑ 145.000	74.89
America***	❑ 125.000	64.56	❑ 95.000	49.06	❑ 140.000	72.30
Albermonaco***	❑ 110.000	56.81	❑ 85.000	43.90	❑ 120.000	61.97

Please indicate here your second choice: _____

N. of room (s) _____ (❑ single, ❑ double, ❑ double with single occupancy)

Arrival date _____ Departure date _____ n. of nights _____

Special requests _____

All quotations are per person per night with bed and breakfast accommodation, and include **bus transportation** from hotels to conference site and return trips. The above special rates are valid only for requests received by July 20th, 2000.
After July 20th, 2000 accommodation will be processed on a "space available" basis only. Rates may increase significantly.
The accommodation will be paid by you directly in the hotel.

In order to garantee the hotel reservation we need the details of your credit card. (see table below). In case of no show one night will be charged on your credit card.

BANQUET
AH2000 Social Dinner will be held on Tuesday August 29th, 2000.
Note that the Social Dinner is not included in the conference fee.

- ❑ AH2000 Social Dinner on Tuesday August 29th, 2000 at Italian lire 85.000 (43.90 EUROS) per _____ person(s)
- ❑ Vegetarian menu requested

TOTAL AMOUNT: _____ EUROS

For banquet pre-booking and pre-payment are requested.

PAYMENT FOR BANQUET – credit card data are necessary also for hotel reservation only.

- ❑ I authorise the charge of my credit card (VISA, EUROCARD, MASTER CARD or AMERICAN EXPRESS) of:

  TOTAL AMOUNT: Italian Lire _____ EUROS _____

  Card Type (VISA, EUROCARD, MASTER CARD or AMERICAN EXPRESS)_____

  Credit Card Number _____

  Expiration Date _____

  Name as it appears on card _____

  Signature _____

A written confirmation will be sent back to you within a few days after receiving the registration form properly filled out.

In accordance with Law no. 675/96 we hereby declare that any personal information in our possession will be used only for the purposes of the conference.