



ICCMSE 2006

Anifantis Tours
Greece
Tel. ++302262026479-80
Email: aatours@otenet.gr

HOTEL RESERVATION FORM

Panorama Hotel

Title _____ Surname _____ First Name _____	
Address _____	
City _____	
Postcode _____	Country _____
Telephone _____	Fax _____
Email _____	Mobile Phone _____

Hotel Reservation

Prices are per room per night included half board (the meal is an offer from the Organizing Committee), every child 0-2 years old is free of charge and 2-12 50% discounts

Type of room(s)	Price(s)
Single room	65€
Double room	100€
Triple room	130€

I wish to reserve _____ room(s) _____ with _____ bed(s)

Lunch : _____ or Dinner: _____

Arrival date: ___/___/___ Departure date: ___/___/___

Confirmation

Please complete this section to guarantee your booking. Without this guarantee your room may be released. 50 % deposit upon reservation and 50 %, one month prior arrival to be guaranteed by credit card or bank transaction:

1. By Credit Card

Mastercard Visa

□□□□ □□□□ □□□□ □□□□ Expire date □□□□

cvv: _____ (three digit number at back of your credit card is required)

Remark: Bank commission excluded

2. By Bank Transaction

Bank : Bank of Piraeus

IBAN Number : GR5901721550005155017591373

Bank swift Number : PIRBGRAA

Account Number : 5155-017591-373

Please send by fax details from your transaction. - Remark: Bank commission excluded

Cancellation. In the event of no-show or cancellation the client may be liable to the following cancellation charges: • 14 days before the date of arrival: the deposit will be refunded after deduction of 10% to cover expenses incurred. • Less than 14 days before the date of arrival: the hotelier is allowed to retain the deposit.

Please send this form to Anifantis Tours via Fax to (Greece)
++302262089488 in order guarantee your reservation