



ICCMSE 2007



HOTEL RESERVATION FORM MARBELLA CORFU Hotel

Title Mr Mrs Dr Prof Surname First Name

Address City

Country Postcode Telephone

TeleFax Email Mobile Ph.

<input type="radio"/> Single room	76 Euro	I wish to reserve <input type="text"/> room (s)	Arrival Date <input type="text"/>	Departure Date <input type="text"/>
<input type="radio"/> Double room	107 Euro			
<input type="radio"/> Triple room	133 Euro			

Prices are per room and per night including half board (the meal is offered by the Organizing Committee only for the participant that have booked room at Marbella Hotel), every child at the age of 0-2 is free of charge and at the age of 2-12 has 50% discount.

To make a firm booking we need the details of your credit card or bank transaction to our account. 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. If you choose 2. Bank Transaction, send by fax details from your transaction.

1. By Credit Card

Name of the card holder Billing Address

Country City Post Code

Credit Card Credit Card Number Expire Date CVC Number

2. By Bank Transaction

Bank : ALPHA BANK
 Bank Number : 680 00 2002 000260
 IBAN Code : GR69 0140 6800 6800 0200 2000 260
 Swift Code : CRBAGRAAXX
 Under the name of : Marbella S.A.

In the event of a cancellation we will require notification in written 14 days prior to the scheduled arrival date, otherwise the deposit amount will be retained in respect of our cancellation fee.

Important Notice

We notice hear that the hotels with cheaper rooms are of at least 2km distance from the conference center. With the transmission of the hotel reservation form, to the fax number of Organizing Committee, you have guarantee the special low rooms' prices
 After you complete this form please send it to the fax of Organizing Committee ++302109420091

Date

Signature _____