



HOTEL RESERVATION FORM

HOTEL TOURING

ETAPS CONFERENCE 2008
Budapest, March 29 – April 06 2008

FAMILY NAME: _____ **Mr/Ms/Dr** _____

FIRST NAME: _____

COMPANY: _____

ADDRESS: _____

TELEPHONE: _____ **TELEFAX:** _____

E-MAIL: _____

CREDIT CARD NUMBER: _____

EXPIRY DATE OF CREDIT CARD: _____

SINGLE ROOM with bath(*)	€ 31.-/room/night
DOUBLE ROOM with bath (*)	€ 42.-/room/night
TRIPLE ROOM with bath (*)	€ 57.-/room/night
SINGLE ROOM without bath(*)	€ 22.-/room/night
DOUBLE ROOM without bath (*)	€ 34.-/room/night
TRIPLE ROOM without bath (*)	€ 38.-/room/night
QUADRUPLE ROOM without bath (*)	€ 42.-/room/night

(*) These special rates include buffet breakfast and all taxes. Check-in time: from 02.00 p.m., check-out time: 10.00 a.m. Please advise if otherwise requested.

PAYMENT: **by cash (at the hotel)** **or** **by credit card (at the hotel)**

DATE OF ARRIVAL: _____

DATE OF DEPARTURE: _____

PARKING PLACE: *yes* *no*

Please send your reservation directly to the hotel till February 29 2008 at the latest.

The reservation can be cancelled free of charge 10 days prior to arrival. If the cancellation is happening between 5-10 days the penalty fee is 40%, between 2-5 days 60%, and in case of no show, or later cancellation in the last 48 hours the 100% of the whole amount will be charged..

**FOR THE HOTEL: CONFIRMATION
RATE**

BOOKING NO: