Credit Card Number: \_\_\_\_\_



## Salerno Microlensing Conference 2011" 20-21-22 January

Please return this form filled in block letters to the hotel either by fax (+390897042030) or by e-mail (<a href="mailto:meeting@grandhotelsalerno.it">meeting@grandhotelsalerno.it</a>). The confirmation is subject to hotel availability.

Name	Suri	name		
City	Country		_ Postal Code _	
		Check out		
e-mail	Tel		Fax	
Number of rooms required	Type of room		Number of nights	Special price for SMC2011
•	Standard Light Sin	gle		77,00
	Standard Light Twir	n		99,00
	Standard Light Dou	ıble		99,00
	Standard Light Trip	le		126,00
	Standard Light Qu	adruple		153,00
	Standard Single	-		102,00
	Standard Twin			124,00
	Standard Double			124,00
	Superior Single			122,00
	Superior Twin			144,00
	Superior Double			144,00
	Superior Triple			171,00
	Superior Quadrupl	e		198,00
	Deluxe Single			142,00
	Deluxe Double			164,00
	Deluxe Triple			191,00
	Deluxe Quadruple	9		218,00
	Half Board suppler	nent		30,00
	Notes: , VAT 10% and Buffet Breal rt view – Superior and Delu theck out until 10.00 am			
The booking confirmat cannot be guaranteed.	A credit card number is	I within 07/01/11. Beyond required to confirm. No p	penalty will be applied	ation of the mentioned rate d for cancellations received e amount of the 1st night.
Payment method				
Please send a copy of tl		BAN: IT96 Y 03002 15200 000 +39 089 7042030, specifyin action date.		DE: BROMITR1640
	MasterCard	American Express	□Diner	S
Card Holder's Name				- 

"I forward you my credit card details for guarantee purposes. In case of cancellation or no-show, I authorize the Hotel to deduct from the credit card indicated the charge according to the above policy."

Date: Guest's Signature Hotel Confirmation number:

Expiration Date: \_\_\_\_\_ Card holder Signature: \_\_\_\_\_