

# HOTEL RESERVATION FORM

(fax this form directly to the hotel)

Hotel .....

Fax # .....

**Subject: CARE06 – Annual Meeting**

NAME & SURNAME: \_\_\_\_\_

INSTITUTION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/REGION: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ ZIP CODE/POSTAL CODE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

**TYPE OF ROOM:**

**SINGLE B&B** at ..... €/day       **DOUBLE B&B** at ..... €/day  
to share with .....

**ARRIVAL DATE:** .....      **ARRIVAL TIME:** .....

**DEPARTURE DATE:** .....      **NUMBER OF NIGHTS:** .....

As guarantee, I send my credit card details:

**CREDIT CARD TYPE:** \_\_\_\_\_

**CREDIT CARD #:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_\_