

Auger analysis meeting 2015

Ischia, June 07th – 12th 2015

HOTEL RESERVATION FORM

To be sent via fax or email to:

Hotel Continental - Via M. Mazzella, 88 - 80077 ISCHIA (NA) Italy

Fax: 0039 081 3336276 — E-mail: booking@hotelcontinentalischia.it

Surname		First name
Phone	Fax	Company's VAT nr.
e-mail		
	I would	LIKE TO RESERVE
Date of arrival	Date of depa	nrture Number of nights
		nch, internet Wi-Fi, taxes 10% VAT Included)
-		included – to be paid at the hotel on departure
1 person – Half board 115,00		
2 people – Half board	180,00 EUR	
	Special Rate for reservation	made until April 30 th , 2015
1 person – Half board	100,00 EUR	
2 people – Half board	160,00 EUR	
	METHOD O	PF PAYMENT
Carta SI M Card number	ayment will be due at the check astercard Visa I agree to be charged 1 night for	Other (please specify) Expiration Date r cancellation after May 20 th 2015 or in case of no show 1
Data		Signatura
bank transfer - IBA	AN CODE IT 47 N 05308 39930 00	Signature amount is due, on confirmation by the hotel Continental by 00000010518 – SWIFF Code BLOPIT22 – BIC BPAMIT31 il a copy of the bank transfer statement. Balance of payment is