



ISPC 24
09th -15th June 2019

Royal Continental Hotel
ACCOMMODATION FORM

Name: _____

Surname: _____

Address: _____

City: _____ Country: _____ Code: _____

Telephone _____ Mobile _____

Fax _____ E-mail _____

Classic double room sole use € 145,00

Classic double room € 165,00

Rates are per room, per night, taxes and continental buffet breakfast.
Please note that the city tax is not included. City tax Euros 3.50 per person, per night

Arrival date _____ Departure date _____

Smoking room

No Smoking room

I will be sharing a room with Mr /Ms _____



Credit Card Payment:

Card details: Diners Mastercard Visa

Number _____

Expiry Date _____

Security code _____

Hotel Cancellation Policy:

- No Later than 1/11/2018: Penalty 1 night
- From 2/11/2018 to 15/01/2019: Penalty 50%
- After 15/01/2019: Penalty 100%
- For no-show, and early departure will be charged the total amount to the credit card you sent.

Please, sign /send this form - via e-mail for the attention of:

e-mail: congressi@avenuemedia.eu

Signature for your acceptance

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