HOTEL RESERVATION CARD MERCURE HOTEL VILLA ROMANAZZI CARDUCCI

Meeting INFN - WIN Bari, 3-8 June 2019

TO BE SENT TO THE HOTEL RESERVATION DEPARTMENT TILL 1/4/2019 Please fill in one form for each room

Email booking@villaromanazzi.com or fax +39 080 5560297

FAMIL	_Y NAME	FIRST NAME			
CHECK IN DATE		CHECK OUT DATE			
NUME	BER OF NIGHTS				
Telep	hone number	Fax number			
Exped	cted arrival time	Flight/Train number			
ROOM		(daily rate €114,00) (daily rate €129,00) (daily rate €153,00) (daily rate €180,00)			
	UARANTEE THE RESERVATION s the square corresponding to the give	n guarantee)			
	I give the following credit card details				
	Type of cardnumber	expir			
	Card holder				
	IF YOU WANT TO GUARANTEE THE R ENCLOSED AUTHORIZATION (on the	ESERVATION BY CREDIT CARD PLEASE FILL IN THE second page).			
	I make a bank transfer equivalent to the first night amount WITHIN 1/4/2019 to TOUREXP S.R.L VIA G. CAPRUZZI, 326 - 70124 BARI BANCO DI NAPOLI SEDE DI BARI IBAN: IT59N0101004015100000070305 BIC: IBSPITNA				
	As the bank transfer has been made please send us copy of the payment advice to booking@villaromanazzi.com or fax +39 080 5560297				
no pe	CELLATION POLICY: enalty for cancellations communicated ralent to the first night amount.	d within 10/4/2019. Tardy cancellations will involve a penalty			
DATE		SIGNATURE			

I DO AUTHORIZE THE HOTEL TO INFORM THE MEETING ORGANIZATION ABOUT MY RESERVATION.

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IN CASE OF TARDY CANCELLATION OR NO SHOW I DO AUTHORIZE THE HOTEL TO CHARGE THE D	UE
PENALTY , EQUAL TO THE FIRST NIGHT AMOUNT, ON THE FOLLOWING CREDIT CARD	

Type of card	number	expir	
Card holder			
Signature			
Date			