## HOTEL RESERVATION FORM HOTEL / RESIDENCE PAVILLON

Please complete the form to book your accommodation and send it by fax to +39 11 534409 or by email to wons2012@stilema-to.it. You will receive a confirmation within 5 working days after receipt of the completed Hotel Reservation Form. Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Affiliation: Citizenship: Hotel Pavillon (Conference hotel) - Bed & Breakfast SINGLE ROOM □ € 92,00 DOUBLE/TWIN □ € 79,00 each person In case of the above-named hotel is fully booked, you will be entertained in the Hotel Cresta et Duk http://www.chotels.it/it/cresta et duc/ Residence (located in front of the Hotel Pavillon) - Bed & Breakfast The guest of the Residence Hotel will be hosted for breakfast at the Pavillon Hotel ONE BEDROOM APARTMENT 1 persons  $\square \in 77,00$  ONE BEDROOM APARTMENT 2 persons  $\square \in 37,00$  each person TWO BEDROOMS APARTMENT 2 persons  $\square \in 52,00$  each person TWO BEDROOMS APARTMENT 3 persons  $\square \in 37,00$  each person Name(s) of person(s) sharing the room: \_\_\_\_\_ Departure date \_\_\_\_\_ Arrival date Privacy: We warrant complete privacy on personal data (Italian Law n. 196/2003). Data will be kept and used for communications concerning the conference organization only. **Reservation Guarantee/Cancellation Policy** Room reservations must be accompanied by credit card details in order to guarantee the reservation. In case of cancellation after December 18th the amount of one night will be charged as cancellation fee If a guest arrives late or departs early, the guest is still liable for the period of reservation made. Card type: □ VISA □ MasterCard Card Holder Name \_\_\_\_\_ Card Number \_\_\_\_\_ CVV \_\_\_\_\_ Exp Date: \_\_\_\_\_ Authorized Signature Name Address City State ZIP Country Phone Fax e-mail

## **Organizing Secretariat**

(Last name) (First name) (M.I.)

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