

Hospitality Services Booking Form

Please fill in the Hospitality Services Booking Form in CAPITAL LETTERS and tick where appropriate. This form is for one delegate only and his accompanying person(s). You are kindly requested to send this form by fax or e-mail to the Conference Organisers **C&C International Group of Companies** Tel.: +30 210 6889100, Fax. (attn. Hospitality Dept): +30 210 6844777, Hospitality Department e-mail: eir-hosp@candc-group.com

You may also book hospitality services online at: <http://www.excellence-in-rheumatology.org/>

I. DELEGATE'S DETAILS

Surname:

First name:

Title
(Dr, Mr, Mrs, Ms, other):

Male ☐

Female ☐

Position / Department / Organisation:

Example

Assistant Dean for Clinical Affairs and Professor
Complete Denture and Biomaterials Departments
School of Dentistry
University of Michigan, Ann Arbor, MI, U.S.A.

Correspondence Address (Street & Nr):

Organisation ☐

Home ☐

City/Town
:

Post Code:

Country:

Tel. (please include country code):

Fax:

Mobile:

E-mail*:

Social media account(s) (URL) : _____ / _____ /

***Kindly notice that this field is mandatory, as all correspondence will be delivered via e-mail.**

II. ACCOMPANYING PERSON'S DETAILS

Surname:

First name:

Male ☐

Female ☐

Adult ☐

Child ☐

Year of
birth:

III. CONTACT PERSON IN CASE OF EMERGENCY

Surname:

First name:

Mobile:

E-mail:

IV. ACCOMMODATION RESERVATION PROCEDURE

- Please select the room type of your preference and fill in the required information.
- The duly completed Hospitality Services Booking Form should be forwarded to the Conference Organisers **C & C International Group Of Companies**, fax (attn. Hospitality Dept.): +30 210 6844 777, e-mail (Hospitality Department): air-hosp@candc-group.com
- All bookings for rooms require payment of one night's rate as deposit at the moment of booking.** A letter confirming your reservation will be sent to you by e-mail within three (3) working days from the day both the Hospitality Services Booking Form and your payment have been received. Should you not receive this letter in due time, please contact the Conference Organisers.
- The Conference Organisers will charge your credit card with the balance due on **December 19th, 2011**. The hotel voucher will be forwarded to you by e-mail within three (3) working days from the day your payment has been received. **All hotel bookings are considered valid only upon full payment of the room and receipt of the hotel voucher.**
- The Conference Organisers reserve the right, upon delegate's agreement, to transfer the room reservation to a hotel other than the one initially selected in case there are no available rooms.

MELIA CASTILLA HOTEL Conference Venue	ROOM RATE (per room/night) in EUROS	CHECK-IN DATE	CHECK-OUT DATE	TOTAL COST
Double Room	195.00 € □/...../...../...../.....€
Double for single use Room	177.00 € □/...../...../...../.....€

SILKEN PUERTA CASTILLA HOTEL 800m from Conference Venue	ROOM RATE (per room/night) in EUROS	CHECK-IN DATE	CHECK-OUT DATE	TOTAL COST
Double Room	168.00 € □/...../...../...../.....€
Double for single use Room	143.00 € □/...../...../...../.....€

NH LA HABANA HOTEL 1,4km from Conference Venue	ROOM RATE (per room/night) in EUROS	CHECK-IN DATE	CHECK-OUT DATE	TOTAL COST
Double Room	158.00 € □/...../...../...../.....€
Double for single use Room	138.00 € □/...../...../...../.....€

ABBA CASTILLA HOTEL 850m from Conference Venue	ROOM RATE (per room/night) in EUROS	CHECK-IN DATE	CHECK-OUT DATE	TOTAL COST
Double Room	150.00 € □/...../...../...../.....€
Double for single use Room	138.00 € □/...../...../...../.....€

AMARAL HOTEL 600m from Conference Venue	ROOM RATE (per room/night) in EUROS	CHECK-IN DATE	CHECK-OUT DATE	TOTAL COST
Double Room	110.00 € □/...../...../...../.....€
Double for single use Room	97.00 € □/...../...../...../.....€

Special Requests:	
Special Dietary Requirements:	

Rooms are available for a minimum stay of 3 nights for the period 23 – 30/1/2012

The abovementioned prices are in EUROS (per room/night) and include:

- Accommodation
- Buffet Breakfast
- VAT

Arrival / Departure Policy for Hotels in Spain

Standard Check-in Time: after 12:00 hrs Standard Check-out Time: before 12:00 hrs

For earlier check-in and/or later check-out, please take into account that you may do so upon request and depending on the room availability at the particular hotel. Please bear in mind that there might be an extra charge based on the time of actual check-in or check-out.

IMPORTANT NOTES:

In case of non arrival(s), the hotel(s) reserve the right to release the room(s) within 24 hrs., without further notice, provided that participant(s) have not informed the Conference Organisers about their late arrival(s). No refunds will be made for non arrival(s).

Late arrival(s) and/or early departure(s) (based on the dates of the confirmed booking), will result in the charge of the total room cost(s) and no refunds will be made.

V. TOURS RESERVATION PROCEDURE

- Please select the tour of your preference and fill in the required information.
- All tours require full payment at the moment of booking. A letter confirming your reservation will be sent to you by e-mail within three (3) working days from the day both the Hospitality Services Booking Form and the payment have been received. Should you not receive this letter in due time, please contact the Conference Organisers
- **Minimum participation of 25 persons is required for all tours.** The Conference Organisers reserves the right to cancel the tour and refund the participants if the minimum number is not reached.
- Pick up & drop off point for all tours will be the Conference Venue – **Istanbul Congress Centre**

TOURS		
<u>Madrid sightseeing and Royal Palace (Half Day)</u>		
Dates: 25/01 <input type="checkbox"/> 26/01 <input type="checkbox"/> 27/01 <input type="checkbox"/> 28/01 <input type="checkbox"/>		
Price per person: 35€	Nr of Tickets:	Total Cost:€
<u>Hapsburgs Madrid walking tour and Royal Palace (Half Day)</u>		
Dates: 25/01 <input type="checkbox"/> 26/01 <input type="checkbox"/> 27/01 <input type="checkbox"/> 28/01 <input type="checkbox"/>		
Price per person: 35€	Nr of Tickets:	Total Cost:€
<u>Royal Monastery of Escorial (Half Day)</u>		
Dates: 25/01 <input type="checkbox"/> 26/01 <input type="checkbox"/> 27/01 <input type="checkbox"/> 28/01 <input type="checkbox"/>		
Price per person: 42€	Nr of Tickets:	Total Cost:€
<u>Toledo (Half Day)</u>		
Dates: 25/01 <input type="checkbox"/> 26/01 <input type="checkbox"/> 27/01 <input type="checkbox"/> 28/01 <input type="checkbox"/>		
Price per person: 43€	Nr of Tickets:	Total Cost:€

All tours include English speaking guide, transfers from/to Conference venue, entrance fees

VI. CANCELLATION POLICY

- Cancellations received prior to July 31st 2011 will receive full refund minus 40 € administrative fee.
- Cancellations received between August 1st and October 31st, 2011 will be charged with one (1) night stay.
- Cancellations received between November 1st and December 19th, 2011 will be charged with two (2) nights stay.
- There will be no refund for cancellations received after December 19th, 2011.

Any refunds that may occur to cancellation and/or alteration will be processed within two (2) months following the conclusion of the Conference.

VII. PAYMENT DETAILS

All payments related to Hospitality Services should be made by credit card (belonging either to you or to a third party) **Personal checks are not accepted.**

Please fill in the following fields and tick where appropriate:

Payment by credit card: Visa ☐ MasterCard ☐ AMEX* ☐ (*not accepted for on line and on site reservations)

Credit card number:

Card expiry date: Month Year

Cardholder's name:
(as displayed on the card)

Cardholder's telephone number
(please include country code):

Bank issuing Details:

Three digit numbers as displayed at the back side of your card:

I hereby authorize **C&C International Group of Companies** to debit this card with the total amount of €.....and any subsequent changes [cancellation/administrative fee(s)] to the items booked for Mr / Mrs in view of his/her participation in Excellence in Rheumatology 2012.

Cardholder's Signature:
(Please do not type your name: Original signature is required.)

In case you provide information for a credit card that belongs to a third party, a photocopy of the credit card and the cardholder's passport (or ID card) is required in order to confirm the transaction. Please send the requested documentation to the Conference Organisers by fax or email: Fax: +30 210 6844 777 (attn. Hospitality Dpt.) Email (Hospitality Dpt.): eir-hosp@candc-group.com

VIII. BILLING DETAILS

Please tick one of the following billing options: Receipt* ☐ Invoice ☐

In case of invoice please fill in the following details:

Individual's name/ Company Name:

Profession/ Field of activities:

Address (street & number):

Zip code:	City:	Country:
Tel. (please include country code):		
Fax (please include country code):	E-mail:	
Tax ID Nr: Mandatory Field	Local Tax Authority-DOY (Greek delegates only)	

*** A receipt will be issued in case you do not choose one of the options.**

"The Conference Organisers of the [Excellence in Rheumatology 2012](#) reserve the right at any time to change the programme or to cancel or postpone the Conference. In the event of cancellation or postponement, their liability is limited to refunding any fee already paid. The Conference Organisers will notify registered participants at the address shown on their registration form of any decision to cancel or postpone. The Conference Organisers strongly recommend attendees take out their own insurance against any losses arising from cancellation or postponement of the Conference or the inability of a participant to attend for any reason whatsoever, and they accept no liability for any loss or damage suffered by any participant or accompanying person or other person whatsoever."

It should be noted that the data given in this form will not be disclosed to any third parties who are not directly involved in the organisation of the Excellence in Rheumatology 2012 nor will it be publicized in any other way.

*I agree to the collection and processing of my personal data **by C&C International Group of Companies**, for the purpose of sending information material (newsletter) in relation to conferences with similar topics as well as promotional and advertising e-mails as part of its advertising policy.*

YES ☐ or **NO** ☐

I hereby confirm that I have read and understood the registration terms as well as the cancellation and substitution policy, which I accept without any reservations.

Date.....**Signature**.....

(Please do not type your name: Original signature is required.)