



ESSDERC-ESSCIRC 2002
Firenze, Italy
23-27 September, 2002

HOTEL ACCOMMODATION FORM

Please, complete and fax this form to:
Scaramuzzi Team Girovagare Viaggi
Firenze (Italy)
phone: +39 055 494949 fax: +39 055 476393
e-mail: hotels@studioscaramuzzi.com

Last Name	First Name	Middle Initial
Title	Affiliation	
Address		
Zip Code	City	Country
Daytime Phone	Fax	e-mail
Date of Arrival	Date of Departure	N. of Nights

<i>Please book:</i>				<input type="checkbox"/> Room for 1 person	<input type="checkbox"/> Room for 2 persons	<input type="checkbox"/> Double
						<input type="checkbox"/> Twin
<input type="checkbox"/> DE LUXE	295 / 430 € (Euro)	500 / 600 € (Euro)				
<input type="checkbox"/> SUPERIOR	250 / 280 € (Euro)	300 / 345 € (Euro)				
<input type="checkbox"/> EXTRA CONFORT	200 / 230 € (Euro)	245 / 280 € (Euro)				
<input type="checkbox"/> EXECUTIVE	160 / 185 € (Euro)	200 / 235 € (Euro)				
<input type="checkbox"/> STANDARD	110 / 145 € (Euro)	155 / 180 € (Euro)				
<input type="checkbox"/> ECONOMY	85 / 100 € (Euro)	115 / 135 € (Euro)				
<i>The above-mentioned prices are per room/per night, breakfast included. Reservation guaranteed before 30 June, 2002</i>						

We strongly recommend early registration and hotel booking due to the high reservation requests in September.

Hotel reservations and credit card numbers with expiry date (only as a guarantee) must be received by the Scaramuzzi Team Girovagare Viaggi. You will pay directly at the hotel. A confirmation for the hotel accommodation will be sent by the local agency.

The agency will assign a double room for single use in case no single room is available. Cancellations and/or changes should be made in writing to the address shown in this form.

Method of Payment

Direct payment at the Hotel.

VISA EUROCARD MASTERCARD AMERICAN EXPRESS

Name (as it appears on Credit Card) _____

Card number

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 Exp. date

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Signature _____ Date _____