

DANUBIUS HEALT SPA RESORT HELIA

HOTEL BOOKING FORM

AIPPI-MIE-MSZJF CONFERENCE

To be returned to the Hotel Conference Secretariat
no later than, 6 August 2007

ATTENDEE:

Name:

Address / invoice address:

Phone/Fax nbr/ e-mail.:

DATE OF ARRIVAL:

DATE OF DEPARTURE:

ACCOMMODATION REQUIRED:

Single room

Double room

Extra balcony

Non smoking room

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Rate/Night:

EUR 125

EUR 140

EUR 10

(Rates include 20 % VAT, American buffet breakfast, free parking and the use of the wellness and thermal centre.)

METHODS OF PAYMENT:

CREDIT CARD GUARANTEE OF PAYMENT

Reservations will be held until 6 PM on day of arrival, unless guaranteed by major credit card. Any reservation not guaranteed is subject to cancellation at 6 PM on the arrival date. Guaranteed reservations must be cancelled by 6 PM the days of arrival to avoid a no show charge.

Credit cards used as a guarantee for payment will only be charged with one night rental fee, in case of cancellation received after 26 August 2007, or non-attendance.

Undersigned (name)..... authorise use of my credit card to be used as a guarantee for payment of the above reservation.

Cards: American Express Visa Diners Club Euro/Master Card

Card number:.....

Expiry date:.....

DATE:.....

SIGNATURE:.....

Mail: H-1372 Budapest, P.O.B. 471, Hungary
Fax: +361-353-1780
e-mail: mie@t-online.hu