



**\*\*\*HOTEL B.A.S.**

**Żabiniec street 16  
31-215 Kraków  
Tel: 012 416 11 11  
mobil: 519 168 166**

**Price:  
SG room: 229 PLN  
DB room: 299 PLN**

*Prices included breakfast, parking, internet and TV. We prefer payment in EURO.*

**COST 928 3<sup>rd</sup> ANNUAL WORKSHOP  
(23 - 25 SEPTEMBER 2009)**

E-mail: [hotel@hotelbas.pl](mailto:hotel@hotelbas.pl)  
<http://www.hotelbas.pl>

NAME : \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV/STATE \_\_\_\_\_ ZIP/POSTAL CODE: \_\_\_\_\_

COUNTRY \_\_\_\_\_

PHONE NO(with area code) \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

(note: This information will be used to mail or fax an acknowledgement of your reservation)

SENT CONFIRMATION BY:  FAX  E-MAIL:

PASSPORT NUMBER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

**PLEASE RESERVE:**

- Single Room
- Double Room

ARRIVAL DATE: \_\_\_\_\_ DEPARTURE DATE: \_\_\_\_\_

STAYING A TOTAL OF \_\_\_\_\_ NIGHTS.

**CANCELLATION POLICY: If you cancel your reservation 4 days prior to date of arrival, there is no penalty charge. For cancellations made after that date, you will be charged for full-stay nights.**

NAME OF THE BANK: \_\_\_\_\_ CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRE DATE: \_\_\_\_\_ CVV2/CVC2\*: \_\_\_\_\_

\*The last 3 number at the signature base back of credit card

CARD HOLDER'S NAME: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**PLEASE NOTE THAT IN ORDER TO HOLD YOUR RESERVATION, WE KINDLY ASK YOU TO FILL UP THIS FORM AND SEND BACK TO US WITH A DOUBLE SIDED COPY OF YOUR CREDIT CARD AND IDENTITY CARD BEFORE August, 1<sup>st</sup>, 2009.**