



CANEUS Shared Small Satellites

Cssp (collective, security, safety, and prosperity) International Worksho
20-21-22 October 2010 –Marina di Carrara, Italy



Hotel Booking Form

Please complete and send by 15 September 2010 to:
CARRARACONGRESSI S.r.l. Viale Galileo Galilei, 133 - 54033 Marina di Carrara (MS), Italy
TEL +39 0585 787963 FAX +39 0585 650925 e-mail: booking@carraracongressi.it

FIRST AND LAST NAME _____
COMPANY/INSTITUTION _____
ADDRESS _____
TOWN _____ POST CODE _____ NATION _____
PHONE _____ FAX _____ MOBILE PHONE _____
E-mail _____ VAT NUMBER/TAX CODE (IF APPLICABLE) _____

Please, mark with a X the hotel category and the kind of accommodation

HOTEL	ROOM TYPE DOUBLE FOR SINGLE USE	DOUBLE	IN DATE	OUT DATE
Hotel Dany ****	€ 105,00	€ 135,00		
Hotel Excelsior ****	€ 130,00	€ 175,00		
Hotel Villa Undulna ****	€ 105,00	€ 135,00		
Hotel Goya ****	€ 105,00	€ 135,00		
Hotel Logos ****	€ 105,00	€ 135,00		
Hotel Eden ****	€ 105,00	€ 135,00		
Hotel Tirreno ***	€ 75,00	€ 100,00		
Hotel Morgana ***	€ 75,00	€ 100,00		
Hotel Eco del Mare ***	€ 75,00	€ 100,00		
Hotel Nedy ***	€ 75,00	€ 100,00		
Hotel Al Santandrea ***	€ 75,00	€ 100,00		

Prices are inclusive of VAT per day/per room, breakfast included and BUS SHUTTLE SERVICE to and from the exhibition centre on conference days.

These fares are available only if booking through CarraraCongressi S.r.l. Room assignment will be made according to the order of arrival of the booking forms. If the type of hotel chosen should no longer be available, CarraraCongressi will offer an alternative in the same category, in accordance with the participant's instructions.

BOOKING TERMS

Reservation will be valid only upon receipt of this booking form, duly completed and together with a copy of the document proving the down payment which is equal to the cost of one night's stay in the choice of accommodation. CarraraCongressi S.r.l. will send written confirmation of the reservation via fax or via e-mail, indicating the name and the full address of the hotel. This confirmation letter may be used as a voucher to be given to the hotel upon your arrival. On departure, you will be required to pay the hotel the remainder, including extras, if any, and the hotel will issue a regular invoice for the entire amount, including the down payment. Bookings will be made on a "first come, first served" basis.

PAYMENT CONDITIONS

The down payment of the amount equal to the cost of one night in the chosen hotel and type of room must be made. Euro is the only currency accepted.

CREDIT CARD

I hereby authorize THE HOTEL to charge this credit card for one night's accommodation according to the information included in this form and with my acceptance I confirm that I have read and accepted the cancellation policy shown below.

Credit card Information: Visa Mastercard Am. Express Diners

Card number _____

Expiry date _____

Cardholder's name _____

Signature _____

Security code (last 3 digits on the back of the card) _____

BANK TRANSFER

Attach copy of bank transfer made out to the following account:

**Holder: CarraraCongressi Srl At: Cassa di Risparmio di Lucca Pisa Livorno – Avenza Agency - MS –
IBAN CODE: : IT86 V 06200 24545 000000139981 SWIFT CODE: BPALIT3LXXX Description: Deposit for hotel booking –
CANEUS WORKSHOP 2010**

CANCELLATION TERMS

The deposit is not refundable. No show, late arrival or departure ahead of time will be charged to your credit card. Reserved rooms will be held for participants for the night covered by the booking deposit. Should participants fail to arrive, the hotel will then be free to use the rooms from 10.00 a.m. on the next day, unless previously otherwise notified by the participants.

****Please note that the credit card information regarding your hotel reservation will be transferred to the hotel. Hotels will not accept reservations without a credit card number.***

PRIVACY

In accordance with the Italian legislative decree 196/2003 and subsequent amendments and additions thereto, personal details are confidential and will not be transferred to anyone besides those involved in the service.

Date _____

Signature _____