

COMMON EUROPE - 17th – 20th May 2008



Please complete and sign this form in **BLOCK CAPITALS**,
and e-mail or fax back to Reservations Dept. on the below provided details.

Hotel Contact Information	Reservations Department	
Barcelona Princess Hotel****SUP Avenida Diagonal 1 08019 Barcelona SPAIN Telephone (+34) 93 356 1000 Fax Number (+34) 93 356 1022	Contact Name	Mrs. Thais Zaplana Mrs. Elisabete Mendao
	Tel	(+34) 93 3561000
	Fax	(+34) 93 3561022
	E-mail	bcn.reservas@princess-hotels.com
	Web	www.hotelbarcelonaprincess.com

Passport details			
Title		First Name	Last Name
Company Name			
Personal Address			
City		Country/ State	
Post/ZIP Code		Country	
Telephone		Fax	
E-mail			

Room Reservation Details	
Please reserve the following room at the advertised COMMON EUROPE conference daily rate: * Double room double use: 160,00 € * Double room single use: 145,00 € * Buffet breakfast: Included * 7% VAT not included	
Room occupancy	<input type="checkbox"/> Double single use <input type="checkbox"/> Double double use <input type="checkbox"/> Twin
Arrival Date	Departure date
Partner name (if applicable)	

Booking Conditions & Cancellation Policy	
<ul style="list-style-type: none"> All reservations should be cancelled in writing, stating the reason for cancelling From 30 to 7 days before guest's arrival, a one night accommodation will be charged From 6 days to the guest's arrival 100% of the stay booked will be charged Any "no shows" (guaranteed rooms that are not occupied on the day of arrival) and early departure shall be invoiced on the basis of 100% of the stay. Late Check Out may be requested on the reception. Extra charge may be applicable. Those Late Check Out not authorized will be charged directly to the Credit Card provided. If the delegates wishes to stay over the weekend, we will accept reservations upon availability. Reservations will only be accepted by sending the Registration Form via fax or e-mail but in any case by phone. Reservations will not be accepted without filling all information required, accepting the Conditions and Cancellation Policy, and provide a valid Credit Card details for charges. Please be informed that after 17th April any reservation request will be subject to availability of the hotel. 	
<input type="checkbox"/> I have read and accept the Booking Conditions and Cancellation Policies detailed above.	
Signature:	

Special Requirements (smoking, non smoking,...)
Please indicate below any special requirements you may have:

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Credit Card Information																					
<i>In order to guarantee your reservation, please supply your credit card details:</i>																					
Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club																				
Cardholder's Name																					
Credit Card Number	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Expiry Date																					

Please note: Rooms are held on a guaranteed basis only and you are required to supply credit card details in order to secure your reservation. If you wish to change or cancel your reservation, please contact the Barcelona Princess Reservations Dept. directly to avoid cancellation charges. Please check for details of Booking conditions and Cancellation Policies on first page of this form.

<input type="checkbox"/> I authorize Hotel Barcelona Princess to charge on my Credit Card provided above any charges applicable according to hotel Booking Conditions and Cancellation Policies.	
Signature	
Date	

PLEASE FAX BACK TO HOTEL BARCELONA PRINCESS
(+34) 93 356 1022

Or

PLEASE E-MAIL BACK TO THE ATTENTION OF MRS. ELENA MARKIJANA AT
bcn.reservas@princess-hotels.com