

HOTEL RESERVATION FORM

Please, type clearly!

Last/First Name _____

Organization _____

Mailing address _____

City/State/Country/Postal Code _____

Phone _____

Fax _____

Email _____

Please, cross the first and the second choice for the preferred accommodation

First Choice	Second Choice	Hotel and Room Type	Room Rate (per night)
		Hotel Eden (5*) - Single occupancy	200 Swiss Francs
		Hotel Eden (5*) - Double occupancy	290 Swiss Francs
		Hotel Dante (4*) - Single occupancy	160 Swiss Francs
		Hotel Seegarten (4*) - Single occupancy	120 Swiss Francs
		Hotel Seegarten (4*) - Double occupancy	230 Swiss Francs
		Hotel Meister (4*) - Single occupancy	145 Swiss Francs
		Hotel Meister (4*) - Double occupancy	240 Swiss Francs
		Hotel Diana (3*) - Double occupancy	150 Swiss Francs
		Hotel Ceresio (3*) - Single occupancy	90 Swiss Francs
		Hotel Ceresio (3*) - Double occupancy	100 Swiss Francs
		Hotel International (3*) - Single occupancy	145 Swiss Francs
		Hotel International (3*) - Double occupancy	220 Swiss Francs
		Hotel Rosa (2*) - Single occupancy	92 Swiss Francs
		Hotel Rosa (2*) - Double occupancy	145 Swiss Francs

Room rates are per night and include continental breakfast.

Room rates are valid if reservation is received by **30 May 2003**, subject to room availability. After this deadline, the regular hotel rates may apply.

Confirmation will contain the name and the address of the hotel in which the rooms have been reserved.

Arrival date and approximate time: _____ Number of rooms: _____

Departure date and approximate time: _____ Number of nights: _____

Reservation must be guaranteed by credit card.

Card Type (cross one): ☐ MasterCard ☐ VISA ☐ American Express

Credit Card # _____ Expiration date _____

Card Holder (Last/First Name) _____

Signature _____ Date _____

Cancellations will be accepted without penalties if performed before **30 June 2003**. Cancellation received after 30 June 2003 are subject to a charge equal to the total amount due for whole reserved period (i.e., the number of reserved night times the daily rate of the reserved room).

*Send the completed registration form **by fax** to the conference hotel reservation service:*

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