



FEMTEC Conference - 15-20 October 2017

HOTEL RESERVATION FORM

To be sent **e-mail:** direzionetermeischia@gmail.com

Surname _____ First name _____

(2nd person double room)

Surname _____ First name _____

Company/Institution _____

Address _____

Town inc. Zip Code _____ Country _____

Phone _____ Company's VAT nr. _____

e-mail _____

I WOULD LIKE TO RESERVE TO HOTEL CONTINENTAL TERME (ISCHIA)

Date of arrival _____ Date of departure _____ Number of nights _____

Flight n ° from to Naples Arrival time

Flight n ° from Naples to Departure time

RATES per whole period (lodging, breakfast and lunch, taxes 10% VAT Included)

City tax 1,50 Eur per person per day not included – to be paid at the hotel on departure

... **person** 6 days (5 nights) all-inclusive - ACCOMODATION IN DOUBLE ROOM 790,00 € per person Total €

.. **person** 6 days (5 nights) all-inclusive - ACCOMODATION IN SINGLE ROOM 945,00 € Total €

.. **person** 4 days 3 nights) congress only - ACCOMODATION IN DOUBLE ROOM 500,00 € per person Total €

person 4 days (3 nights) congress only - ACCOMODATION IN SINGLE ROOM 600,00 € Total €

ESCORTS 6 days (5 nights) no congress ACCOMODATION IN DOUBLE ROOM 690.00 €

Total €

..... **person** Congress only 100.00 €

Total €

METHOD OF PAYMENT

Bank transfer - BANCO DI NAPOLI FILIALE ISCHIA
ALGA srl
Via dello Stadio 79, 80077 Ischia (Napoli) Italy
IBAN CODE **IT02S0101039930100000002153**

BIC – SWIFT Code **IBSPITNAXXX**

Please send it by e-mail copy of report direzionetermeischia@gmail.com

The reservation is active after payment, Hotel reservation deadline: September 15th, 2017,
for cancellation after September 15th, 2017 or in case of no show I agree to be charged 3 nights.

Date

Signature
