

Mrs Ms Mr

Last Name: _____

First Name: _____

Company: _____

Address: _____

Zip code: _____ Town: _____ Country: _____

Phone number: ++ _____ Fax: ++ _____ Mobile: ++ _____

E-Mail address: _____

Accompanying Person: Last & First Name _____

HOTEL BOSCOLO PLAZA RATES

Classic Room occupancy: 180€ Single room - 190€ Double room (1 large bed) /Twin room (2 single beds)

Breakfasts included / Local tax 2.25€ / pers./day not included – to be paid when booking or when checking out

Your choice : Single room Double room Twin room

Arrival date: / / **Departure date:** / / **Number of nights:** _____

Special needs: _____

Your reservation will be made according to the availabilities upon receipt of your booking form. The block is guaranteed from May 15th to May 19th, 2017. Anything prior of after these dates is upon hotel availability.

IMPORTANT NOTE: Accommodation will be confirmed within 48 hours on receipt of the full pre-payment of your stay. A confirmation letter by email will follow with all relevant details of your reservation. On site at your hotel, your credit card will be required to guarantee any extra services.

No hotel reservation will be considered if received without corresponding payment.

PAYMENT MODALITY - All bank charges must be paid by the participant

CHECK IN EURO issued to **Voyages C. MATHEZ** - 4 Avenue Georges Clemenceau – 06000 Nice

BANK TRANSFER *Copy must be enclosed to the booking form*

Beneficiary: Voyages Mathez - 4 Avenue Georges Clemenceau - 06000 NICE - **Reference:** TMFORUM 2017 + NAME

Bank SMC - 45 Boulevard Dubouchage 06000 NICE (F) /**Bank Number:** 30077/**Branch:** 01814/**Account:** 0000250272Q/**Key:** 10

IBAN: FR90 3007 7018 1400 0025 0272 Q10 / **SWIFT:** SMCTFR2AXXX

BY CREDIT CARD **VISA** Eurocard/Mastercard

Credit card number _____ Expiration ____/20____ Card Security Code |____|____|____|

Card holder's name _____

I hereby authorise Voyages C. MATHEZ to debit the above mentioned credit card for 2 nights deposit.

CANCELLATION POLICY

☞ Any modification or cancellation has to be sent in writing (letter, fax or e-mail) to Voyages C. Mathez by April 25, 2017.

☞ Upon arrival, the hotel will ask your credit card for print as a guarantee.

☞ In case of early departure or later arrival, the credit card can be charged of the total amount of nights reserved and extras on site.

☞ In case of a no show, the total amount of nights reserved will be charged.

I hereby confirm having read, understood and agreed with the important notes and cancellation policies mentioned here above.

DATE ____ / ____ / 2017

SIGNATURE

Please fill in one form per participant and send it to Patricia Racher E-mail : patricia.racher@matheztravel.com



PROFESSIONAL CONGRESS ORGANIZER / DESTINATION MANAGEMENT COMPANY

Voyages C. Mathez – 4 Avenue Georges Clemenceau – 06000 Nice – (France)

Phone: +33 (0) 4 93 82 68 82 - Fax: +33 (0) 4 93 87 93 60