

ACCOMMODATION FORM

H10 marina barcelona

★★★★

T (34) 93 309 79 17 – F (34) 93 309 97 62

Av. Bogatell, 64-68 – 08005 Barcelona

Reservas/ Bookings: www.hotelh10marinabarcelona.com

www.h10hotels.com

GROUP: TELEMEDICINE 12-16 OCTOBER 16

Please fax the completed form directly to the hotel H10 Marina Barcelona

FAX. N° 34-93-309-97-62 Tel. N°. 34-93-309-79-17

Att: Natalia Sánchez ;

Convenciones.hmb@h10hotels.com

LAST NAME: _____ FIRST NAME: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ COUNTRY: _____

ZIP CODE: _____ E-MAIL: _____

TELEPHONE: _____

ACCOMMODATION

Please check your needs for accommodation:

ROOM TYPE

Double for single use
Double for double use

125 € / room / night
135 € / room / night

- ✓ Buffet breakfast included
- ✓ Vat included
- ✓ Tourist tax not included: 1.21 € per person and per night

TRAVEL INFORMATION

Arrival date: _____ Estimated arrival time: _____

Departure date: _____ Estimated departure time: _____

RESERVATION MUST BE GUARANTEED WITH A CREDIT CARD NUMBER.

Credit Card Name and Number : _____

Expiry Date: _____

Credit card holder: _____

**THE FINAL CUT-OFF DATE FOR BOOKING IS 27/06/16
FOLLOWING THIS DATE ALL BOOKINGS WILL BE SUBJECTED TO AVAILABILITY.**

72 HOURS CANCELLATIONS OR NO SHOWS WILL BE CHARGED FULL STAY TO THE ABOVE CREDIT CARD. ALL CHANGES AND CANCELLATIONS MUST BE IN WRITING.

HOTEL USE ONLY

Booking is: Confirmed Reservation number: _____

Acknowledged by: _____

