



HOTEL MERCURE BUDA** / Hungary**
REGISTRATION FORM

AAMAS '09

09-16th May 2009

GENERAL INFORMATION

Surname of participant: _____

First name: _____

Company name and address: _____

Telephone: _____

Fax: _____

E-mail: _____

ARRIVAL DATE: _____

DEPARTURE DATE: _____

Please tick accordingly, which room type you would like to book:

- Standard single room: EUR 105,-/room/night**
 Standard double room: EUR 115,-/room/night

The above prices include taxes and buffet breakfast.

METHOD OF PAYMENT:

We kindly ask you to inform us about your credit card details, because we can only guarantee your reservation after 6 p.m. if we know it.

Type of Credit card: _____

Number of Credit Card: _____

Expiry date: _____

Please return this application form by fax at latest till 15th March 2009.

After this date confirmation of accommodation is subject to availability.

Cancellation deadline without penalty till 24th April 2009. If cancellation is received after the this date, the first night deposit will be charged/kept by the hotel.

Hotel Mercure Budapest Buda** / Hungary, 1013 Budapest, Krisztina krt. 41-43.**

MICE Sales Department

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