



21st SETAC EUROPE ANNUAL MEETING

Milan (Italy), MAY 15th - 19th, 2011

MILANO CONVENTION CENTRE

Hotel Reservation Form

Last name _____

First Name _____

Company _____

Tel. _____ Fax _____

Invoice to: _____

Name/Company _____

Tax identification or Fiscal Code _____

VAT number _____

Address for invoice _____

Zip code _____ City _____

E-mail address for invoice as pdf file: _____

ACCOMMODATION:

First choice: Hotel _____

Second choice: Hotel _____

Single Double room - single use Double Triple

Arrival date _____ Departure date _____ Nights n. _____

Accompanying person's name: _____

Notes: _____

ACCOMMODATION POLICY:

This form must be sent by March 10th 2011 to New Aurameeting.

After that date room reservations will be made upon hotels availability only and the price applied may be different.

- **Payment by bank transfer or cheque:**

After receiving confirmation from New Aurameeting on the availability of the hotel chosen, the full advance payment of the all nights is due to confirm the reservation by March 10th 2011.

New Aurameeting will issue regular invoice, to be sent via e-mail.

- **Payment by credit card:**

After receiving confirmation from New Aurameeting on the availability of the hotel chosen, all the nights will be charged by the hotel on the provided credit card by March 10th 2011.

The Hotel will issue regular invoice.





PAYMENTS:

1. cheque n.

_____ of the Bank

entered to: **NEW AURAMEETING s.r.l.**

2. bank transfer to **NEW AURAMEETING s.r.l.** (VAT n. 04055900965)

Banca Popolare di Milano Ag. 15

IBAN: IT65 T 05584 01615 000000043206 SWIFT: BPMIITM1015

Please specify in the reason for payment, the name of the participant and the reason of payment (copy of the bank voucher has to be sent by fax or e-mail).

3. credit card

Eurocard Mastercard American Express Visa Carta Si

Credit Card Number: _____

Expiry Date: _____

Safety code (written on the back of the card): _____

Total amount: _____

Card owner: _____

In conformity with the legislative decree 196/2003, New Aurameeting grants the maximum privacy in treating the personal datas supplied, that will be used only for communications related to the services offered and for administrative processes.

Date _____

Signature _____

Notes:

- Forms received missing credit card datas or not followed by payment of all the nights will not be considered.
- Cancellation Policy: in case of cancellation or change of hotel bookings received in writing by March 10th 2011, you will be entitled to full reimbursement. Cancellations or changes submitted after that date and no-show, imply a 100 % penalty

PLEASE SEND THIS FORM BY FAX OR E-MAIL TO:

NEW AURAMEETING s.r.l.
Via Rocca d'Anfo, 7 - 20161 Milano (Italy)
Tel. +39 02 66203390 r.a. - Fax. +39 02 66200418
E-mail: setac2011@newaurameeting.it
www.newaurameeting.it

