

Hotel Registration Form
“EUROMED MARITIME 2010”
Marseille, September 13th till 14th,2010



For guaranteed reservations, you are kindly requested to fill in the present form with your Credit Card number and return it to us dully signed. In order to secure space, registration form should be sent to the Concorde reservations office fax number:

+33 (0)1 57 00 50 31 or E-mail: **reservations@concorde-hotels.com**.

Family Name: _____ **First Name:** _____

Address: _____

Company Name: _____

City: _____ **Country:** _____ **Postal Code:** _____

Tel: _____ **Fax:** _____

E-mail: _____ **Tel:** _____

A special room rate has been negotiated for this event. Delegates, wishing to make a reservation should contact the Concorde reservations office and refer to their participation to the “**EUROMED MARITIME 2010**” booking.

Any reservation requests will be subject to the hotel's availability.

Single Superior Room (city view): € 150,
Double Superior Room (city view): € 160,
Single Deluxe Room (see view and terrace): € 180,
Double Deluxe Room (see view and terrace): € 190

City tax extra: 1,5 euros per day and per person.
Room rate includes Continental Buffet Breakfast.

Room Category required: Superior Room **Deluxe Room:**

Room type required: Single occupancy **Double occupancy**

Arrival Date: _____ **Departure Date:** _____ **Total:** _____ **nights**

Flight Carrier: _____ **Arrival time at Marseille Airport:** _____

By signing this form you kindly state your full acceptance and authorization for us to charge your credit card as per terms and conditions indicated hereunder.

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Credit Card Type:

- American Express
- Visa
- Eurocard
- Master Card

Number: _____

Expiring Date: _____ **Cardholder's Name:** _____

Signature: _____ **Date:** _____

Terms and Conditions

DEPOSIT:

- The Hotel requires one night deposit by Credit Card, payable upon reservation request/confirmation in order to guarantee the reservation. This deposit is non refundable.

CANCELLATION POLICY:

- For any cancellation received after 4 pm on the arrival day, non-show reservations and shortened stays, the equivalent amount of reserved room nights will be charged as cancellation fee.

To be completed by Hotel Concorde Villa Massalia:

Reservation confirmation received from: _____ Signature: _____

Confirmation Number: _____ Date: _____