**10th IMPR**

**12 September 2016-14 September 2016**

**Europôle de l’Arbois- Aix en Provence**

### BOOKING ACCOMODATION FORM

**Please return this form to the following address:**

**Office de Tourisme / Accomodation Congress Department**

**Les Allées Provençales - 300, avenue Giuseppe Verdi - 13100 Aix-en-Provence - FRANCE**

**Phone: 00 33 (0)4.42.161.009 / Fax: 00 33 (0)4.42.161.179 / @:** **hotelcongres@aixenprovencetourism.com**

**NB: To send before 29 of July, beyond that date, rates and availabilities are not guaranteed.**

Company Title

Address

Post Code City Country

□ Mr □ Mrs First Name Last Name

Phone Cell Phone

Fax Email

CHECK IN : \_\_\_\_\_/ \_\_\_ / 2016 CHECK OUT : \_\_\_\_\_/ \_\_\_ / 2016

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Hotels | **Rates / Night****(Breakfast / Local tax not included)** | **Your Choice****(1 to 3)** | **Single****(1 pers.)** | **Double****(2 pers.)** | **Twin****(2 beds)** |
| \*\* |
| Hotel Concorde | **From 72€ to 92 €****Breakfast : 10€** |  | **[ ]**  | **[ ]**  | **[ ]**  |
| Hotel La Caravelle | **89 €****Breakfast : 10€** |  | **[ ]**  | **[ ]**  | **[ ]**  |
| Hotel Mozart | **83 €****Breakfast : 10€** |  | **[ ]**  | **[ ]**  | **[ ]**  |
| Résidence \*\*\* |
| L’Atrium | **100 €****Breakfast : 12€** |  | **[ ]**  | **[ ]**  | **[ ]**  |

In order to guarantee your booking, please communicate us your credit card details:

(CB: Visa card, MasterCard or American Express only)

Credit card Number: \_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_/ Expiration date: \_\_\_\_\_/ \_\_\_\_\_

Security code: \_\_\_\_\_\_\_\_\_\_

**CONFIRMATION:** Each attendant will receive a confirmation, specifying the booking conditions and the hotel address.

**CANCELLATION CONDITIONS:** Requests for cancellation or date amendment must be sent by mail or fax directly to our department.

Only cancellation requests received at least 48 hours before the arrival date will be accept. After this delay, the hotel is allowed to charge one night. .

**Date: Signature:**