

**FIFTH FORUM ON
RESPIRATORY
TRACT
INFECTIONS**

HOTEL ACCOMMODATION FORM

Please use capital letters

Surname _____ Name _____

Address _____

Zip code _____ City _____ Country _____

Phone _____ Fax _____

E-mail _____

Hotel preferred _____ n° specify type of room(s) _____ Room(s) _____




Date of arrival _____ Date of departure _____

For a total n° of _____ Night(s), for _____ Person(s) _____

Hotel	Single room	Double room
MELIA SITGES****S Joan Salvat Papisseit, 38 Sitges	€ 195,00	€ 205,00

Prices, intended for room inclusive of breakfast buffet and taxes, are valid at the moment of printing and are susceptible to variations according to the Tourist Board's List.

I wish to pay by:

- Credit Card:** Visa  Mastercard/Eurocard  American Express 
- Cheque in Euro** made out to PUBLI CRÉATIONS
- Bank Transfer** made out to PUBLI CRÉATIONS (please enclose photocopy of bank receipt)

Bank details: ING Baring Private Bank (Monaco), 1, avenue des Citronniers, 98000 Monaco (MC)
IBAN MC 23 1450 8000 0151 0479 3001 D18 BIC (swift) INGBMCMC
Clearly State: **"FIFTH FORUM ON RESPIRATORY TRACT INFECTIONS"**

Credit Card payment only Payment shall be made payable to PUBLI CRÉATIONS - Monte-Carlo
Please debit my: VISA MASTERCARD/EUROCARD AMERICAN EXPRESS
PLEASE JOIN A COPY OF CREDIT CARD: _____ Date _____ Signature _____

Card holder (Surname & First Name) _____

Card Number _____ Expiry Date _____

€ _____ Date _____ Signature _____

€ **10,00 (Reservation fee, per room)**

Total € _____

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Date: _____ Signature _____

