



"NaNax 3 Nanoscience with Nanocrystals"
Lecce, Museo Sigismondo Castromediano 21/23 May 2008

Accomodation Form

Please complete this form using CAPITAL Letters and send it via fax or e-mail to:



73100 LECCE - Italia - Via Benedetto Croce, 13
tel. 0832.372111 - 12 - fax 0832.310808
www.archeocongressi.it - info@archeocongressi.it

Surname _____ FirstName _____

Title/Position _____

Organization _____

Address _____

City _____ Province _____

Country _____ Zip Code _____

Phone _____ Fax _____ E-mail _____

First name and family name of the ACCOMPANYING PERSONS _____

Hotel Rates in Euro, in Bed & Breakfast per room, per night

www.vestashotels.it

- HOTEL PRESIDENT ****
 - Double single use € 80
 - Double room € 100
- HOTEL EOS ***
 - Double single use € 80
 - Double room € 100
- RISORGIMENTO RESORT *****
 - Double single use € 150
 - Double room € 220

Bed & Breakfast Rates in Euro, in Bed & Breakfast per room, per night

- ARCO VECCHIO www.arcovecchio.com
 - Double single use € 60
 - Double room € 80
- CASA ELISABETTA www.beb-lecce.com
 - Double single use € 50
 - Double room € 80

Please reserve as indicated below:

Check-In _____ Check-Out _____

Please reserve bus shuttle from Brindisi Airport to the hotels and from the Hotels to Brindisi Airport.

Number of persons _____

€ 40 for person round trip

SUBTOTAL € _____

Arrival and departure information

by air **Arrival** Day _____ Time _____ Flight Number _____

Departure Day _____ Time _____ Flight Number _____

other

Hotel Reservation and Payment Conditions

Hotel reservation will be guaranteed until April 24th 2008. We will proceed to reserve a room for you only after we have received an advance payment of a deposit equivalent to one night stay. In case of no-show, the deposit will not be refunded. The final balance will be completed directly at the hotel. A final invoice will be issued by the hotel. Alternatively, you may decide to make an advance payment of the total hotel amount. We will try to accommodate you in the hotel of your choice. However, please remember that reservation will follow the "first come, first served" policy. ARCHEO will confirm each reservation either by fax or by e-mail, and will together with name and hotel address. If you decide to prolong your stay at the hotel over the weekend that follows the Conference (from Saturday 24th to Sunday 25th) the hotel will guarantee the same special conference rate.

Cancellation

Cancellation requests must be made by writing to the "Archeo Organizing Secretariat". Cancellation requests must be received before April 30th 2008. The refund will be issued after the conclusion of the Conference.

Fiscal data for the invoice

Invoice heading _____

Address _____

(Only for Italian and ECC participants) VAT Number/IVA _____

Fiscal Code (for Italian only) _____

Payment Form

Payment has to be made without cost for the beneficiary.

All payments must be in Euro. Accepted methods of payment are by bank transfer and via credit card. In case of bank transfer please attach the proof of payment. Please tick the appropriate boxes. In case of credit card payment please provide the information requested below.

Bank transfer to: UNICREDIT BANCA
CIN M ABI 02008 CAB 79500 C/C 000001283888
Cod. SWIFT UNCRIT 2 B
Cod. IBAN IT 88 M 02008 79500 1283888

Credit Card

I hereby authorize ARCHEO to debit the below mentioned card account with the total value of the items booked by me on this form.

- Visa
- MasterCard
- American Express

Card Number _____ Issuing Bank _____

Expiry date Month _____ Year _____ Name of Card Holder _____

CVC number (last 3 numbers on the back of your credit card) _____

Address of cardholder _____ Postal Code _____ Country _____

Card Holder's Signature _____ Date of signing _____