

Please complete and return to
HOTEL FLORA by 7 DECEMBER 2007

Name	
Organisation	
e-mail	
phone	fax

Please, reserve from _____ (check-in) to _____ (check-out)

ROOM TYPOLOGY	€	PUT A <input type="checkbox"/>
Single room	90,00	
Double room for single use	110,00	
Double room	145,00	
Triple room		

I'm planning to arrive on _____ at _____ and to depart
on _____ at _____

Please give your credit card details in order to secure accommodation

Please guarantee my room, with the following credit card:

VISA American Express MASTERCARD

Card holder name

Number

Expiry date

Cancellation Policy

Cancellations or reductions must be communicated within 48 hours before arrival day: after that time the hotel will apply 1 night of penalty. For no-show and/or reductions communicated during the stay, the hotel will charge all nights booked as a penalty.