

DEXA
APPLICATION - HOTEL CARD

PLEASE FILL IN WITH PRINTED LETTERS AND SEND TILL **1 JULY** to the ADDRESS



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email: frycz@kte.pl

Ms. / Mr _____

Organization _____

TEL. _____ FAX. _____ E-MAIL _____

ADDRESS to send correspondence/street house no/ _____

CITY _____ CODE _____ COUNTRY _____

ACCOMPANYING PERSON Ms. / Mr _____

The organizers have at their disposal hotels from 3rd SEP till 08th SEP 2006

ARRIVAL DATE _____ DEPARTURE DATE _____ Number of nights _____

- **Places in the hotels will be assigned as applications are received**
- **The basis to book accommodation is sending an application by mail, fax, e-mail till 1 July 2006, and transferring payment due for the booked accommodation according to table**
- **In case of reservations booked after 1 July 2006 the rate for the reserved places will be 20% higher**
- **Resignation from the booked accommodation after 1 July 2006 – payment equal to rate per 1 night.**
- **Resignation from the booked accommodation after 13 AUG 2006 or no-shows – full payment for all booked nights**
- **Price for accommodation includes breakfast, VAT tax and local fee**

PLEASE MAKE THE RESERVATION OF ACCOMMODATION ACCORDING TO THE BELOW ORDER. AT THE SAME TIME I ACCEPT CONDITIONS OF MAKING THE RESERVATION.

.....
Orderer's signature

HOTEL	Room	Price EUR	No nights	Total EUR
D.S PIAST / student dormitory / 47, Piastowska Street	Single	22		
	Double	40		
D.S AWF / student dormitory / 82, Jana Pawła II avenue	Single	25		
	Double	45		
Hotel Mikołaj / center / 30, Mikołajska Street	Double	115		
	Apart. dbl	135		
	Triple	130		
	Apart. Tpl	150		
	Dbl as Sgl	110		
Hotel SKY / center / 6, Dunajewskiego Street	4 pax room	20 per pax		
D.S AGH / student dormitory / Reymonta Street	Single	40		
	Double	60		

**PREFERRED MODE OF PAYMENT FOR THE HOTEL, PAYMENT INTO ACCOUNT:
PKO BP 91 1020 2892 0000 5202 0148 5341 Krakowskie Towarzystwo Edukacyjne Sp. z o.o**
OR BY CREDIT CARD

PLEASE CHARGE MY CREDIT CARD ﷲ VISA ﷲ EUROCARD/MASTERCARD

.....
Credit card no. Validity Card's owner amount

.....
Date Card owner's signature

If you need a receipt please send the information required to issue receipt to our fax or e-mail