

BOOKING FORM – EPG Prague 2004 Conference - May 18 – 23, 2004

Accommodation at the Charles University Hostel Jinonice

U Kříže 8, Prague 5 – Jinonice, Czech Republic

DEADLINE FOR BOOKING: April 10, 2004**TO BE FAXED TO: (+420) 267 310 503****OR MAILED TO: Action M Agency, Vrsovicka 68, 101 00 Praha 10, Czech Republic**

SURNAME:.....FIRST NAME:.....

TITLE: Mr./Mrs./Ms./Dr./Prof.ACCOMPANYING PERSON:.....

TELEPHONE NO:FAX NO:

E-MAIL: TOTAL NO. OF NIGHTS REQUIRED:.....

ARRIVAL (TIME):DEPARTURE DATE:

ARRIVAL TIME (CHECK-IN from 14.00).....DEPARTURE TIME (CHECK-OUTuntil12.00).....

PAYMENT – Charles University Hostel Jinonice**PAYMENT BY CREDIT CARD****ACCOMMODATION**

SINGLE ROOM: 880 CZK X ____NIGHTS =

DOUBLE ROOM: 1300 CZK X ____NIGHTS =

TOTAL: CZK**CREDIT CARD DETAILS**

VISA* MASTERCARD/EUROCARD*

AMEX JCB DINERS CLUB

NUMBER:**LAST 3 DIGITS:***(on the signature strip - the reverse side)***EXPIRE:****NAME ON CC:***I, the undersigned, authorise the Action M Agency to charge to my credit card the total amount of*

_____CZK

YOUR SIGNATURE:**PAYMENT BY BANK TRANSFER**

yes

no

Payment to be sent to the Czech Republic, Komerční Banka Praha 10, Milena Zeithamlova - Action M Agency, SWIFT: KOMB CZ PP, account CZK No. 221442101/Bank Code 0100. Please make sure that the bank transfer is made net of all bank charges and commissions.

NAME OF THE PAYER:**NAME OF THE BANK:****ACCOUNT NUMBER:****DATE OF PAYMENT:****Cancellation Policy**

- cancellation received 1 month before arrival: **no charges**
- cancellation received 14 days before arrival: **one night room charge**
- cancellation received less than 5 days or a "no show": **full booking charges**

PRINT**&****SEND****Thank you**