

HOTEL-BANQUET-EXCURSION RESERVATION FORM - KR'98

PLEASE SEND FORM TO: Trentino holidays, Via Solteri 78, 38100 Trento, Italy, preferably by fax:
+39 (461) 825-657.

First Name: _____ Last Name: _____

Affiliation: _____

Address (Zip Code/City/Country): _____

Phone number: _____ Fax number: _____

E-mail: _____

Traveling plan:
arriving on _____ by _____ at _____

departing on _____ by _____ at _____

Traveling with: _____

HOTEL ACCOMMODATION

PREFERRED HOTEL: _____

2nd CHOICE: _____

single, double/twin, double with single occupancy

number of persons: _____ arrival: _____ departure _____

sharing room with: _____

Total deposit in Italian lire _____

ADDITIONAL SERVICES (please tick choice(s))

A) BANQUETS

KR'98 SPECIAL DINNER on June 4 at Italian lire. 80,000 X ___ person(s)

NM'98 SPECIAL DINNER on May 31 at Italian lire. 65,000 X ___ person(s)

KBS V&V'98 SPECIAL DINNER on June 1 to be paid on-site

DL'98 SPECIAL DINNER on June 7 at Italian lire. 65,000 X ___ person(s)

FOIS'98 SPECIAL DINNER on June 7 at Italian lire. 70,000 X ___ person(s)

Total deposit in Italian lire _____

B) EXCURSIONS

TRENTO AND CASTLE on June 1 at Italian lire 25,000 X ___ person(s)

BIKE TRIP on June 4 at Italian lire 50,000 X ___ person(s)

DOLOMITES AND FALLS on June 4 at Italian lire 50,000 X ___ person(s)

TRIP TO VENICE on June 6 at Italian lire 160,000 X ___ person(s)

TRIP TO VENICE on June 9 at Italian lire 160,000 X ___ person(s)

Total deposit in Italian lire _____

C) AIRPORT TRANSFER (guaranteed for groups of at least 12 people)

Verona airport/Trento at Italian lire 30,000 X ___ person(s) one way

Venice airport/Trento at Italian lire 50,000 X ___ person(s) one way

Milano Linate airp./Trento at Italian lire 65,000 X ___ person(s) one way

Total deposit in Italian lire _____

Grand Total in Italian lire _____

PAYMENT (Without charges for the beneficiary)

International check payable to *Trentino holidays*

Money order/Bank wire to: Trentino holidays, Via Solteri 78, 38100 Trento, Italy, on bank account
no. 10/20883 c/o Banca Popolare del Trentino - sede di Trento (ABI 05290/2 - CAB 01800/2).

Authorize charge of my credit card: (VISA or MASTER CARD)

(Please add 6% to the Grand Total for credit card fees)

Credit Card Number _____

Expiration Date _____

Name as it appears on card _____

Please charge my credit card for the amount of _____ Italian lire

(please insert here the Grand Total + 6%)

Signature _____

(This form is also available at <http://www.kr.org/kr/kr98/>)