

# HOTEL BOOKING FORM

SPTF Annual Meeting

June 28-July 2, 2010 – Bern, Switzerland

## PLEASE MAKE A RESERVATION AS FOLLOWS:

Title

First Name  Last Name

Flight information

Address for all correspondence

Telephone  Fax

Email

Vegetarian

Arrival date  Departure date

My credit card details (please tick appropriate box)

Master card  Visa  Amex  Diners

Car number  Expiry date

Name shown on card

Card holder's billing address

Other remarks

### Declaration of consent:

I understand and accept the cancellation/modification clauses explained above and authorize the hotel to charge my credit card if I may incur in penalty.

Signed  Date

**Please send this form by email or fax to the hotel of your choice.**