

XXXVII. COSAC
Berlin, 13th to 15th May 2007

Hotel reservation
Jolly Hotel Vivaldi Berlin
Friedrichsstraße 96
10117 Berlin
Telephone: +49 30 206 266 0
Fax: +49 30 206 266 999

INSTITUTION:	
Surname:	Mr/Mrs/Ms
First Name:	
Address:	
City:	Country:
Telephone:	Facsimile:
e-mail:	
Will be accompanied by:	
Surname:	First Name:

Room type	Costs (inc. breakfast) per night	Check box
Single Room	139,- €	
Double Room	154,- €	

Stay Information

Date of arrival: May 2007 Flight number: Time:

Date of departure: May 2007 Flight number: Time:

☐ Non-Smoking ☐ Smoking

Credit card payment

Credit card: ☐ Diners ☐ Mastercard ☐ Visa ☐ American Express

Issue No: _/_/_/_/_/_/_/_/_/_/_/_/_/_ Expiry date:/...../.....

Date:..... Signature:

Please complete and return this form by **10 April 2007** directly to the reservation department at the Jolly Hotel Vivaldi Berlin. By completing this form, you accept the terms and conditions for bookings and cancellations of Jolly Hotel Vivaldi, Berlin.

Please note: Reservation requests will be dealt with on a first-come, first-served basis. Room cannot be guaranteed for Hotel Reservation Forms received after the 10 April 2007 deadline.

Confirmation of the hotel: Booking number:
Stamp/ Signature