



GRUPO HUSA

EUROPEAN NUCLEAR CONFERENCE 2010
30/05/10-01/06/10 Barcelona, Spain

Please use one form per delegate. Please send fax this form back to the Hotel Rey Juan Carlos I : + 34 93 364 42 32 or to reservas@hrjuancarlos.com, before the 30/08/10

By sending this booking form, the Hotel cannot guarantee availability in case that all the allotment reserved for this event has been booked by other attendees. In that case reservations will be made on space availability basis.

Delegate Information (please fill in)

Name: Country:
Company: State-Province / Zip-Postal Code:
Address:
email:
Tel: Fax:

I would like to make the following reservation at the special NAME OF THE EVENT rate for the Hotel ReyJuan Carlos I:

FIRST 125 ROOMS

Double room for single use: 190€ per night
Double room: 240€ per night

LAST 25 ROOMS

Double room for single use: 210€ per night
Double room: 240€ per night

VATA and Buffet Breakfast are included in the room rate

Arrival Date: Departure Date:

Hotel Cancellation Policy

The reservation can only be confirmed with a credit card number + expiry date. All cancellations should be cancelled in writing.

- The indemnity will not be incurred if the cancellations are received 21 days prior to the date of arrival.
Any cancellations received between 20 and 3 days prior to the date of arrival, will incur an indemnity equal to 1 night's accommodation, included, in this case, any taxes and/or expenses that they could have earned, and it will be imputed as cost of opportunity.
Any cancellation received between 2 days prior to arrival date as well as no-shows or early departures will incur cancellation charges equal to the entire stay, included, in this case, any taxes and/or expenses that they could have earned, and it will be imputed as cost of opportunity.

Payment

Reservations can only be confirmed with a credit card number with valid expiry date

Visa Mastercard American Express Diners Club

Hotel Use Only

one of The Leading Hotels of the World

Credit Card: _____
Card Number: _____
Expiration Date (MM/YY): _____
Cardholder Name: _____
Signature of Card Holder: _____ Date: _____

Confirmed By: _____
Confirmation Nr.: _____
Signature: _____

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