

# ACCOMMODATION FORM

NAME

FIRSTNAME

ADDRESS

ZIP CODE

CITY/COUNTRY

TELEPHONE

FAX

EMAIL

## HOTEL RESERVATION

HOTEL	CATEGORY	SINGLE/NIGHT	DOUBLE/NIGHT	CHOICE
4* PALAIS DE LA MEDITERRANEE	CITY VIEW	265.00 €	310.00 €	
	PARTIAL SEA VIEW	290.00 €	335.00 €	
4*- BOSCOLO EXEDRA	CLASSIC	220.00 €	240.00 €	
4*- BOSCOLO PARK OR PLAZA	CLASSIC	199.00 €	219.00 €	
4*-FOUR POINTS/ELYSEE PALACE	STANDARD	195.00 €	210.00 €	
4*-GRAND HOTEL ASTON	CLASSIC	200.00 €	200.00 €	
4*-GRAND HOTEL ASTON	SUPERIOR	230.00 €	230.00 €	
4*-NICE RIVIERA	CLASSIC	165.00 €	181.00 €	
4*-NICE RIVIERA	SUPERIOR	179.00 €	195.00 €	
4*-RADISSON BLU HOTEL	CITY VIEW	190.00 €	205.00 €	
4*-RADISSON BLU HOTEL	SEA VIEW	230.00 €	245.00 €	
4*-SPLENDID	HARMONY	155.00 €	175.00 €	
4*-SPLENDID	DELUXE	185.00 €	205.00 €	
4*-WESTEND	STANDARD	240.00 €	240.00 €	
4*-WESTMINSTER	STANDARD	180.00 €	195.00 €	
3*-GRAND HOTEL LE FLORENCE	STANDARD	124.70 €	144.40 €	
3*-LES CIGALES	STANDARD	135.00 €	135.00 €	
3*-MERCURE GRIMALDI	STANDARD	138.00 €	154.00 €	
3*-MERCURE PROMENADE	STANDARD	158.00 €	184.00 €	
3*-MERCURE MARCHE FLEURS	STANDARD	134,50 €	164.00 €	

**PAYMENT**

The amount of one night will be requested as deposit plus 20 € administrative costs.  
 The remaining nights, local taxes and all extras will be paid directly to the hotel.

ARRIVAL DATE  DEPARTURE DATE

SINGLE ROOM  DOUBLE ROOM  TWIN ROOM

DEPOSIT  € (rate/1 night) + 20,00 € (administrative costs) =  €

Bank Transfer (1 night + 20 € administrative costs)  
 By bank transfer to the following account:

Account holder: SARL IMPACT  
 Bank: Credit Agricole - Nice Gorbella  
 IBAN: FR76 1910 6006 5743 6177 1432 033  
 SWIFT (BIC): AGRIFRPP891

When making a bank transfer, it is mandatory to send a copy of the transfer receipt with the registration form to:

IMPACT/Christina Loicht - 3 bis, Place Général Goiran - 06100 Nice – France

Bank fees remain at the charge of the registrant.

Credit Card (1 night + 20 € administrative costs)

I, \_\_\_\_\_ herewith authorize IMPACT to debit the amount of \_\_\_\_\_ € from the following credit card:

Visacard                      Mastercard                      Eurocard

N° \_\_\_\_\_

Expiry Date \_\_\_\_ \_\_\_\_ CVC \_\_\_\_ \_\_\_\_

Credit Card Holder \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Check (1 night + 20 € administrative costs)  
 Payment only in euro and made out to IMPACT to be send to:  
 IMPACT/Christina Loicht- 3 bis, Place Général Goiran - 06100 Nice –France

**CANCELLATIONS**

For cancellations before Mars 10, the sum of 20 € will be retained for administrative costs.  
 For cancellation between Mars 10 and April 10, 2010, 1 night will be due. After April 10, no cancellations will be possible.

**ACCOMMODATION FORM TO BE RETURNED TO :**  
**IMPACT Ltd./Christina Loicht**  
**3 bis, Place Général Goiran - 06100 Nice – France**  
**Tel. : +33(0)4 92 07 35 76 – Fax : +33(0)4 92 07 35 86**  
**Email. christina@impact-events.net**