



HOTEL ACCOMMODATION & EXCURSIONS FORM

ESPEN 2004 • 11 – 14 SEPTEMBER 2004 • LISBON • PORTUGAL

Please register on line at www.espen.org

PLEASE TYPE OR WRITE IN CAPITALS

Family Name _____ Prof./Dr/Mr./Mrs./Ms

First Name _____

Institution/Organisation/Company _____

Mailing address _____

Postal code _____ City _____ Country _____

Telephone / / _____

Fax / / _____

E-mail _____

Accompanying person(s) name(s) _____

ACCOMMODATION

MORE INFORMATION ABOUT HOTELS AND RATES CAN BE FOUND IN THE SECOND ANNOUNCEMENT (SEE www.espen.org)
PLEASE INDICATE YOUR CHOICE OF HOTEL:

1st choice: _____ 2nd choice: _____ 3rd choice: _____

Arrival Date: _____ Departure date: _____

Number of Nights: _____ Late arrival (after 18.00): Yes No

Room Type: Single Room Double Room Twin bedded Room

Smoking Room Non-Smoking Room

PLEASE CALCULATE YOUR DEPOSIT:

Number of rooms:	x	Room rate: EUR	=	DEPOSIT (1 night stay): EUR
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Subtotal to be paid _____ EUR (A) _____

Accommodation will only be guaranteed when the payment of the 1st night deposit has been received by the Local Partner, AIMS.

The Hotel Cancellation Policy is the following:

Up to 2 months prior to arrival date: No charge _____ No Show: _____ Full charge _____

2 to 1 month prior to arrival date: 50 % deposit _____ Name Change or _____

From 1 month onwards: Total deposit _____ other alterations after 11 August _____ EUR 15 _____

EXCURSIONS

Excursion	Price	Date	Time	N° of tickets	Total Cost
A taste of Lisbon	EUR 28	12 September	09.30 – 13.30		
Sintra & the Continent West-end	EUR 30	13 September	09.30 – 13.30		
Where Lisbon is most “Alfacinha”	EUR 42	13 September	14.30 – 18.30		

Subtotal to be paid

EUR (B)

Please note that all tours must have a minimum of 20 participants! Deadline for booking: **10 August 2004**.

Full refund of all tours will be granted if written notice of cancellation 2 months prior to the event. For cancellations after that date no refund will be made.

Full refunds will be issued if an activity is cancelled due to lack of participation.

For **post congress tours**, AIMS will be pleased to create a tailor-made offer according to your wishes and budgets. For a personalised proposal, please contact AIMS Portugal!

PAYMENT

I enclose:

Accommodation: EUR _____ (A)

Excursions: EUR _____ (B)

Total amount to be paid

EUR (A+B)

CONDITIONS OF PAYMENT

PLEASE TICK THE APPROPRIATE BOX

Please find attached a copy of my bank transfer, in EURO (€), made payable to:

AIMS Portugal Lta
Account Nr 003300004520892133905
Banco Nova Rede – Tagus Park
Núcleo Central 100, Loja 9
PT-2780 Oeiras – Portugal
Swift code: BCP/BCOMPTPLLNR
Please indicate “free of charge for the receiver account”

By credit card. I authorise AIMS Portugal Lta. to charge my credit card for the total amount indicated above:

American Express

Eurocard / MasterCard

Visa

Cardholder's name: _____

Card number: _____

Expiration date: _____

Signature and date: _____

Remember to state participant name and “ESPEN 2004” on all payments.

Please fax or mail this form duly completed to:

AIMS Portugal Lta.
Rua Garrett 61, 3°
PT- 1200-203 Lisbon, Portugal
Phone (+351) 21 324 50 40
Fax (+351) 21 324 50 51
E-mail espen2004@aims.pt
Website www.aims-international.com

Remember to make a copy of this form for your own files.