## 4th Workshop on Accelerator Magnets in HTS\_WAMHTS-4

Barcelona 15-17 February 2017

## ACCOMMODATION BOOKING FORM

Please read carefully the reservation conditions before sending the reservation request

CONTACT DETAILS										
SURNAME	NAME									
COMPANY/UNIVERSITY		<b>-</b>								
MAILING ADDRESS										
EMAIL	Ph				PHONE					
THE FOLLOWING ACCOMMODATION BOOKING Wishes to reserve room/s in the following h (Please indicate number of rooms)		ED .								
Please send this form DIRECT to the chosen hotel by	Email or Fax	<								
HOTEL	Single	Doubl	e	SE	ND RE	QUES	ST TO	):		
Hotel Amrey Sant Pau** http://www.hotelsantpau.com/ C/ Sant Antoni Maria Claret, 173 Just in front of Casa Convalescència	80,00€	90,00€	<u>boo</u>		hotels AX: +34 Phone s	93 43	3 41 5			
Hotel Ayre Rosellón****  http://www.ayrehoteles.com/hotel-rosellon/ C/ Rosselló, 390	100,00	€ 105,00		FA	arcelor AX: +34 one +32	93 23:	1 86 7			
I have arranged to share with, or will be accompani SPECIAL REQUESTS:	ied by (name	2):								
PLEASE NOTE The pre-booking period is open until 15 January 2 The reservation will be confirmed upon availability Participants should pay the bill directly to the hofull Credit Card details only.	on a first-co				hose re	eserva	tions	with		
I HEREBY GUARANTEE MY RESERVATION WITH		CARD (indic	ate typ	e of cre	dit car	d)				
Credit Card Number:										
Expiry date: Name of the	Cardholder	·								
I AUTHORISE MY CREDIT CARD TO BE DEBITED W OF THE RESERVATION HAPPENS 48 HOURS BEFO								ION		
Date:   Signatu Day/ month / year	ıre:									

