



**HOTEL RESERVATION BOOKING FORM**  
**" 12<sup>th</sup> International School of Biophysics 2014"**  
**HOTEL ZORA\*\*\* - Primošten, September 27th till October 6th, 2014**

**1. PARTICIPANT DETAILS:**

First Name:	
Last Name:	
Adress:	
E mail:	
Phone/Mobile/Fax No.:	

**2. ACCOMODATION IN HOTEL:**

ARRIVAL DATE: _____	DEPARTURE DATE: _____		
<i>Check in: 15:00 / Check out 11:00</i>			
<b>ROOM RESERVATION (Please mark Your choice):</b>			
1/2 Comfort room***	Full Board	47,00 EUR	<input type="checkbox"/>
1/1 Comfort room***	Full Board	64,00 EUR	<input type="checkbox"/>
1/2 Premier Club room****	Full Board	55,00 EUR	<input type="checkbox"/>
1/1 Premier Club room****	Full Board	74,00 EUR	<input type="checkbox"/>
<b>First service:</b> Dinner		<b>Last service:</b> Lunch	
Price is per person/per day. Tax is 1,00 € a day / per person and it is not included in accomodation price.			
<b>If You have chosen double room, please fill the name of person sharing the room with You:</b>			
_____			

**3. RESERVATION CONDITIONS:**

<b>CREDIT CARD GUARANTEE</b>	<b>CREDIT CARD TYPE:</b> <input type="checkbox"/> AMEX <input type="checkbox"/> DINERS <input type="checkbox"/> MASTER CARD <input type="checkbox"/> VISA <b>NAME OF CC HOLDER :</b> _____ <b>CREDIT CARD NO :</b> _____ <b>VALID THRU:</b> _____
<b>ADVANCE PAYMENT</b>	<b>COMPANY NAME:</b> _____ <b>ADDRESS:</b> _____ <b>FAX NO/E MAIL:</b> _____

The hotel only accepts reservations guaranteed with a credit card or reservations that have been paid in advance (if you choose prepayment, the invoice will be issued by hotel Zora Sales department upon receipt of this form).

**Cancellation Policy:**

- 21-15 days prior arrival 20% of total amount of reserved service will be charged
- 14 - 10 days prior arrival 30% of total amount of reserved service will be charged
- 9 - 5 days days prior arrival 60% of total amount of reserved service will be charged
- 4 - 0 days prior arrival and NO SHOW 100% of total amount of reserved service will be charged

**Please, send filled reservation booking form UNTIL 01.09.2014 on fax no. +385 22 571 120 or e-mail:**

[ivana.toric@adriatiq.com](mailto:ivana.toric@adriatiq.com) & [biophysics2014@irb.hr](mailto:biophysics2014@irb.hr)

Information at +385 22 571 881 or 570 048

**PLACE AND DATE:**

**SIGNATURE:**