## "ERE07" HOTEL RESERVATION FORM

(Please, use capital letters)

| Family name:        |                               | First name:       |              |
|---------------------|-------------------------------|-------------------|--------------|
| Gender:             | □ Female □ Male               |                   |              |
| Passport No.:       |                               |                   |              |
| Institution:        |                               | E-mail:           |              |
| Date of check-in:   |                               | Date of che       | ck-out:      |
|                     | Puerto P                      | alace Hotel       |              |
| Type of room:       | ☐ Single room                 | □ Double room     |              |
| Board:              | □ Bed & Breakfast             | ☐ Half Board      | ☐ Full Board |
|                     | Orotava F                     | Palace Hotel***   |              |
| Type of room:       | ☐ Single room                 | □ Double room     |              |
| Board:              | ☐ Bed & Breakfast             | ☐ Half Board      |              |
| I wish to share wit | th another participant or acc | ompanying person: |              |
| Name:               |                               | Passport No:      |              |
| If any child is com | ing with you, please specify  | its age:          |              |
| Indicate any speci  | al arrangement required:      |                   |              |
| Card type:          | □ Visa □ Master               | card              |              |
| Credit card no.:    |                               |                   |              |
| Expiry date (mm/y   | w) /                          | Holder's name:    |              |

Please, return this form to the LOC (Judith de Araoz) by fax (+34 922 605 298). This information will be confidential and it is only necessary to confirm room reservation.