HOTEL Scribe PARIS

BAR EUROPEAN GROUP ANNUAL CONFERENCE 2010
From Friday the 30th of April to the 2nd of may 2010

INDIVIDUAL SUBSCRIPTION FORM - PLEASE FILL IN AND SEND TO THE HOTEL SCRIBE BY FAX N°: 33 1 42 65 39 97 OR EMAIL: H0663-RE@acco r.com

Last name: _____ first name: _____

Company: _____

Address: _____

_____

Phone: _____ Fax: _____

Rate negotiated from Friday the 30th of April to the 2nd of may 2010-
ROOM RATE SINGLE OCCUPANCY: 260€ per room and per night, taxes included
ROOM RATE DOUBLE OCCUPANCY: 280€ per room and per night, taxes included

BUFFET BREAKFAST: Included for one or two persons

You can benefit of this special rate, subscribing before the 30th of March 2010 .After this date the rate won't be applicable any more.

Please reserve:

___ Single room(s) / Arrival date: _____ departure date: _____

I duly authorise to guaranty my entire stay (accommodation and my personal extras) with my below credit card number. The same credit card will be use upon departure to settle my stay. I also authorise to charge my credit card in case of cancellation or no show.

N° ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Expiration date: _____

Cancellation and no show policy is:
- After March 30th 100% of the total amount cancelled will be charged
- All no show will be charge for the entire stay

Please notify your agreement and signature on the terms quoted above:

In **The** **Please sign:**