

PERSONAL DETAILS

FIRST NAME:		FAMILY NAME:	
NIF/ VAT NUMBER / PASSPORT (in case you need the invoice addressed to you):			
ADDRESS:			
CITY & COUNTRY:		ZIP CODE:	
PHONE NUMBER:		FAX Nº:	
E-MAIL:			
If you need an invoice addressed to your institution / lab, please fill in the following blanks:			
COMPANY NAME:			
ADDRESS:		ZIP CODE:	
CITY & COUNTRY:		CIF/VAT Nº:	

ACCOMMODATION

ACCOMMODATION	DOUBLE ROOM		SINGLE ROOM	
	B&B	Only	B&B	Only accommodation
CUATRO POSTES HOTEL 4*	62,00 €	56,00 €	56,00 €	50,00 €
PALACIO DE VALDERRABANOS 4*	68,00 €	57,00 €	56,00 €	51,00 €
II CASTILLAS AVILA HOTEL 4*	84,00 €	68,00 €	70,00 €	62,00 €

YOUR RESERVATION DETAILS

ACCOMMODATION SELECTED To be confirmed according to availability	1 st HOTEL	2 nd HOTEL	3 rd HOTEL
ROOM TYPE:		NUMBER OF	
ARRIVAL	DEPARTURE	TOTAL NIGHTS:	
TOTAL SERVICE:			

METHODS OF PAYMENT

1.- CREDIT CARD: AMERICAN EXPRESS <input type="checkbox"/>				VISA <input type="checkbox"/>		MASTER CARD <input type="checkbox"/>		OTHERS <input type="checkbox"/>	
HOLDER NAME:									
CARD NUMBER:									
EXPIRY DATE:		REVERSE SECURITY CODE (CVV):							

I authorize Viajes El Corte Inglés to charge my credit card the services mentioned in this form.

CARD HOLDER SIGNATURE:

--

2.- BANK TRANSFER: Please, do not forget to mention **NANOSD 2014 AND YOUR NAME.**
 (It is compulsory to send a copy of it either by email or fax nº 0034 95 4225949)

BANK ACCOUNT: ES97 0182 3999 3702 0066 4662
 HOLDER: VIAJES EL CORTE INGLÉS S.A.
 BANK ADDRESS: C/ ALCALÁ, 16. 28014 – MADRID – SPAIN

SWIFT CODE: BBVAESMMXXX
 BANK: BBVA-OFICINA CORPORATIVA