

HOTEL RESERVATION FORM

Accommodation for participants of the ELMAR-2019 symposium will be in Hotel Funimation & Hotel Donat at Borik in Zadar as well as the Symposium.

Please fill in your information using Adobe Reader[®], save the filled form by clicking "Save As" button at the end of the form under the name "hotel_Family Name.pdf" where "Family Name" is your Family Name and send it using "Send" button not later than July 9, 2019.

After July 17, 2019, ILMO TURIZAM agency cannot guarantee to make reservation of your first hotel choice. We will do our best to meet your needs, and offer you hotel reservation you find suitable.

HOTEL (please select)	ROOM TYPE (please select)	PRICE - FULL BOARD per night, per person		
O Funimation****	O Single Room	€ 130		
C Fullmation	O Double Room	€ 90		
O Donat***	O Single Room	€ 55		
	O Double Room	€ 45		

1 EUR ≈ 7.40 HRK (Croatian Kuna)

Local tourist tax included in price

Family Name:		Given Name:						
Accompanying Person (Family and Given Name):								
Institution/Company:								
Mailing Address:								
City:	State:		Zip Code:					
Country:	Phone:		Fax:					
E-mail Address:								
Date of arrival:		Date of departure:						
Comments:								

PAYMENT OPTIONS

PLEASE SELECT YOUR PAYMENT OPTION: O BANK TRANSFER PAYMENT

O CREDIT CARD PAYMENT

ILMO TURIZAM will send you an invoice for hotel accommodation payment if you choose the bank transfer payment option. Please note that the deadline for bank transfer payment should be within 7 days from the date of the hotel reservation confirmed. Please send Ilmo Turizam agency a copy of the payment receipt by e-mail or fax as soon as possible. For credit card payment, please fill in details below:

CREDIT CARD INFORMATION

IMPORTANT If this field is left blank, organizers will send the Invoice to your e-mail address automatically. Otherwise your credit card will be charged. Accepted credit and debit cards are Amex, Diners, Visa, MasterCard and Maestro.

Credit card type (please select):		Diners Club	С	VISA	O MasterCard	O Maestro	
Card number:							
Expiration date (mm/yyyy):							
Name:							
Country:				Please note that our cancellation policy is free			
State:				of charge if reservation is cancelled 10 days prior to arrival; within 10 days we will charge			
Address:	ldress:						
City/Town:				one night stay.			
ZIP:							
Phone number:							

For any other hotel information please contact Ilmo Turizam agency: phone: + 385 1 3776 832; fax: + 385 1 3776 353; email: <u>ilmo-turizam@zg.t-com.hr</u>; address: ILMO TURIZAM, Pantovčak 9, 10000 Zagreb, Croatia.

This Form and all user data will not be published or used in any marketing purposes. The data will be used for creating Invoices for bank transfers and payment only. The collected data will not be shared with any third person or company nor used to create any database for further usage without the written consent of the user. If you want your data deleted at any time, please contact us at <u>elmar2019@fer.hr</u>.