

La Viaggeria S.r.l.

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Viaggi e turismo
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Value Tools

First International Conference on Performance **E**valuation **M**ethodologies and **T**ools

Pisa, Italy / October 11-13, 2006

ACCOMODATION FORM

Please send by fax or by e-mail within **15/09/2006** to:
La Viaggeria Srl , P.zza Martiri della Liberta', 25 – 56127 Pisa (ITALY)
Tel. 0039 50 554034; Fax. 0039 50 551214; e-mail info@laviaggeria.net

NAME:

FIRST NAME:

HOME ADDRESS:

ZIP CODE: CITY: COUNTRY:.....

TEL. FAX.

E-MAIL:

CHECK IN DATE:CHECK OUT DATE:

<i>Category</i>	<u><i>Single Room</i></u>	<u><i>Double Room (single use)</i></u>	<u><i>Double Room</i></u>
****	<i>not available</i>	<i>from 150,00 to 185,00</i>	<i>from 120,00 to 160,00</i>
*** <i>Sup.</i>	<i>100,00</i>	<i>from 100,00 to 150,00</i>	<i>from 110,00 to 140,00</i>
/	<i>90,00</i>	<i>from 80,00 to 120,00</i>	<i>from 90,00 to 130,00</i>

Please note:

- ✓ room will be assigned on a “first-come, first served” basis;
- ✓ **15,00 euro fee will be charge on each booking;**
- ✓ the above rates indicate one room per night and include taxes and breakfast;
- ✓ forms received without payment will not be taken into consideration;
- ✓ e-mail confirmation will be sent once booking has been processed;
- ✓ once single rooms have been sold out, double room (single use) will be automatically assigned;

HOTEL CATEGORY: **** [] *** sup. [] **/** []

[] Single Room n°[] Double Room (single use) n° [] Double Room n°

Payment must be made in **EURO by Credit Card (only Visa Circuit).**

I authorize to charge my credit card the amount of Euro.....

[] VISA [] MASTERCARD [] EUROCARD [] CARTASI'

Card Number Expiry Date.....

Card Holder (capital letters)

Date..... Signature