## Hotel Registration Form

## MEETING "Corfu Summer Institute on EPP and Gravity 2018" 31/8-29/09/18

Please ensure the Hotel Registration Form is faxed or mailed to the

## **DIVANI CORFU PALACE**

20, Nafsikas str. 49 100, Corfu, Greece **Fax: 0030 26610 35929** 

Tel.: 0030 26610 38 996 E-mail: reservations@divanicorfu.gr

For guaranteed reservations, you are kindly requested to fill in the present form with your Credit Card number and return it to us duly signed. For safety reasons, credit card used and its owner, must be present upon checkin. In order to secure space, registration forms should be sent to our reservations fax number 0030 26610 35929,

Family Name:	Fi	rst Name:	
Tel:	Fax:		
A special room rate has been nego the Hotel directly and refer to their		hing to make a reservation should contact	
Room rates are inclusive of Ame	erican Buffet Breakfast, services a	nd current taxes.	
Single Room : € 105 Double Room : € 115			
Room type required: Single occ	pancy Double occupancy		
Arrival Date:	Departure Date:	Total: nights	
credit card used for the reservat	ion.	esence and signature along with the Expiring Date:	
		Date:	
NON-SHOW: In case of non-sho	ow one (1) night cancellation fees w	ill apply.	
Please send this booking form bej	fore		
After this date, the reservation ca	n only be confirmed upon availabili	ity.	
After your request, the hotel will 38996.	send you a confirmation. If you do	on't receive it, please contact +30 26610	
We thank you and are looking forw	ward to welcoming you in our Hotel	"Divani Corfu Palace".	