



## HOTEL ACCOMMODATION FORM

### PARTICIPANT:

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Company/Institution: \_\_\_\_\_  
Position/Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_

***Please indicate your choice of hotel:***

„NEBODER“                       „KONTINENTAL“                       „JADRAN“

***Please indicate your choice of room:***

- SINGLE ROOM  
 DOUBLE ROOM  
 DOUBLE ROOM WITH ADDITIONAL BED \*\*  
 SINGLE ROOM (II) \*  
 DOUBLE ROOM (II) \*  
 SUITE \*  
 SUITE (large) \*

***Please indicate your choice of services:***

- INCLUDING BREAKFAST  
 INCLUDING TABLE D'HOTE (half-board)

***Please indicate your choice of dates:***

- 14 – 19 November 2006  
 14 – 18 November 2006  
 15 – 19 November 2006  
 15 – 18 November 2006  
 Check in: \_\_\_\_\_ Check out: \_\_\_\_\_

### NOTE

Please fill-out the form and indicate your choice of accommodation and dates by ticking the appropriate boxes, sign it (legal entities should place a stamp) and send it to the following address:  
*„Jadran Hoteli“ d.d.*  
*Strossmayerova ulica 1*  
*51000 Rijeka*

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

\* - valid only for hotel „Jadran“

\*\* - not valid for hotel „Jadran“