

**INTERNATIONAL CONFERENCE ON ISOTOPES IN
ENVIRONMENTAL STUDIES
24th - 30th October 2004
HOTEL RESERVATION FORM**

Form to be completed in **BLOCK CAPITALS** and returned to :

Nelly Gastaud, Monaco Tourist Bureau

Tel number : +377 92 16 60 16, Fax number : + 377 92 16 60 00

e-mail : ngastaud@gouv.mc

PLEASE RETURN THIS FORM

by Friday, 17 September 2004.

GUEST DETAILS

Mr Mrs Miss

FAMILY NAME: _____ FIRST NAME: _____

ADDRESS: _____

POST CODE: _____ CITY: _____

COUNTRY: _____

PHONE: _____ FAX: _____ E-MAIL: _____

ARRIVAL

DAY: _____ TIME: _____ FROM: _____

FLIGHT N°: _____

DEPARTURE

DAY: _____ TIME: _____ DESTINATION: _____

FLIGHT N°: _____

ROOM RESERVATION (the price is per room per night)

**RESERVATIONS DEPENDING ON THE HOTEL AVAILABILITY, THE DAY YOU REGISTER,
PLEASE SPECIFY YOUR FIRST AND SECOND CHOICE:**

1st HOTEL CHOICE: _____

2nd HOTEL CHOICE: _____

3 STAR HOTELS

HOTEL ALEXANDRA

SINGLE 100€ DOUBLE 125€

(BREAKFAST INCLUDED) NUMBER OF NIGHTS: _____

HOTEL AMBASSADOR

SINGLE 150 € DOUBLE 150 €

(BREAKFAST INCLUDED) NUMBER OF NIGHTS: _____

HOTEL BALMORAL

SINGLE 110 € DOUBLE 130 €

(BREAKFAST INCLUDED) NUMBER OF NIGHTS: _____

HOTEL TULIP INN

SINGLE 135 € DOUBLE 170 €

(BREAKFAST INCLUDED) NUMBER OF NIGHTS : _____

2 STAR HOTELS

HOTEL DE FRANCE

SINGLE 71 € DOUBLE 90 €

(BREAKFAST INCLUDED) NUMBER OF NIGHTS: _____

HOTEL HELVETIA

SINGLE 76 € DOUBLE 82 €

(BEAKFAST INCLUDED) NUMBER OF NIGHTS : _____

RESERVATION

VERY IMPORTANT :

PLEASE, CONFIRM YOUR RESERVATION BEFORE MONDAY 14th JUNE 2004.

AFTER THIS DATE, WE CANNOT GUARANTEE EITHER THE ABOVE RATES OR AVAILABILITY OF THE HOTELS.

In order to guarantee your room reservation, please fill in :

CREDIT CARD: VISA MASTER CARD AMERICAN EXPRESS

CREDIT CARD N° : _____ EXPIRATION DATE : _____

CARD HOLDER NAME : _____ SIGNATURE : _____