

“ XIII CONGRESO INTERNACIONAL DE LA A.I.E.M.A.

Please fill in and return this document either:

- by **fax: 91.681.45.50 +or**
- by **email (unicarlosiii@viajeseci.es indicating “04615000361- : Your Name”)**.

Contact person: Francisca Sánchez or Marisol Benito (Tel. +34 91.624.57.91 - +34 91 6925653)

Personal data

Surname:

Name:

DNI or passport n°:

Address:

e-mail

Telephone:

Fax:

Nights you are staying (select your option with an “X”):

14SEPTIEMBRE	15SEPTIEMBRE	16SEPTIEMBRE	17SEPTIEMBRE
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Hotel preference: *(Your choice of accommodation will be duly considered, and applications will be processed on a first come, first served basis. If there are no vacancies in the category of your choice, we will do our best to find an alternative).*

1st choice: _____

2nd choice: _____

Any hotel:

(We will send you the hotel voucher to your e-mail address)

Observations (special needs, shared room, etc...): A single room our a double room

2) **ACCOMMODATION FEES** (select your option with an “X”):

HOTELES 3 ESTRELLAS

-Hotel Petit Palace Tres Cruces

-Hotel Petit Palace Cliper

Individual - -82,35euros

Doble --- 92.35 euros

HOTELES 4 ESTRELLAS

-Hotel Petit Palace San Bernardo

-Hotel Petit Palace

Posada del Peine

Individual --- 92,35 euros

Doble-- 102.35 euros

-Hotel NH Nacional

Individual ---- 91.99 euros

Doble---- 101.99 euros

Hotel Tryp Atocha

Individual ----- 92 euros

Doble --- 102 euros

Hotel Vincci 66

Individual----- 92, 35 euros

Doble -----105.00 euros

GETAFE **

H2 Getafe

Individual ---- 65.97 euros

Doble ----- 72.97 euros

** Prices are per night (breakfast included, taxes included). These reservations strictly require credit card data or a copy of the bank transfer receipt.*

3) **PAYMENT:** These details have been faxed on 30/06 at 15.04 to 34 916814550

PAYMENT DETAILS (BY CREDIT CARD)

Card Number:

Expiry date of card

Security code (last 3 digits on rear of card)

Name (as it appears on card):

Signature:

Date:

**PAYMENT DETAILS (BY BANK TRANSFER)
VIAJES EL CORTE INGLES S.A.**

Name of the bank: Banco Santander Central Hispano

Name of the bank: BBVA

Account number:

Account number:

From Spain:

Outside Spain:

0049 1500 03 2810355229

IBAN: ES97 0182 3999 3702 0066 4662

IBAN:ES37 0049 1500 03 2810355229

SWIFT: BBVAESMMXXX

In the "reason for the bank transfer" section, please specify: "**Ref. 04614000604. WORKSHOP 2014 : Your Name**".

PLEASE SEND A COPY OF YOUR BANK TRANSFER WITH YOUR REGISTRATION FORM

INVOICE DETAILS (if different from personal data)

Name:

CIF:

Address to send the invoice: