



# XIII EUROPEAN CHITIN CONFERENCE VIII IBEROAMERICAN CHITIN SYMPOSIUM **ACCOMMODATION FORM**

Family name:  First name:   
Postal address:   
City:  Country:   
Zip Code:  Phone:   
E-mail:

HOTELS	DOUBLE ROOM (2 persons)	DOUBLE ROOM (1 person)	SINGLE ROOM	DISTANCE TO THE VENUE, KM
<sup>a</sup> AC CIUDAD DE SEVILLA BY MARRIOT 4****	115.5 €	104.5 €	-	0.750
<sup>a</sup> SILKEN AL ANDALUS 4****	110.00 €	99.00 €	-	1.300
<sup>b</sup> ALCÁZAR 3***	95.00 €	95.00 €	82.50 €	2.800

10% VAT included; <sup>a</sup>Buffet Breakfast included. <sup>b</sup>Breakfast Included. Hotel cancellation Policy: Cancellations made fifteen (15) to (30) thirteen days prior to arrive will incur an one (1) night charge. Cancellations made seven (7) to fourteen (14) days prior to arrive will incur a two (2) nights charge. Cancellation made less than six (6) days prior to the arrival date will incur a 100% charge. Non show will incur a 100% charge.

**Economic Accommodation (priority to students):** Residencia Universitaria Rector Estanislao del Campo.  
Single room: 41.20 €+10% VAT; Apartment (2 rooms): 64.50€+10% VAT; Breakfast 3.20 +10%VAT

Please select accommodation: AC Marriot    Silken    Alcázar    Residencia Universitaria

**ARRIVAL DATE:**     **DEPARTURE DATE:**   
Nº double rooms:     Nº nights:     Euros:   
Nº single rooms:     Nº nights:     Euros:   
**TOTAL ACCOMMODATION:**  Euros

### CREDIT CARD:

VISA:     MASTER CARD:     DINNERS CLUB:   
CREDIT CARD HOLDER:   
CREDIT CARD NUMBER:     EXPIRY DATE:

I authorize to Events4u to charge my credit card the total amount shown above

### BANK TRANSFER

In euros, by indicating your name and "SIAQ EUCHIS 2017" as payment details.

(It is essential to send a copy by email to: [EUCHIS-SIAQ2017@events4u.es](mailto:EUCHIS-SIAQ2017@events4u.es)).

All fees concerning bank transfer will be supported by sender.

**Bank:** BMN-Mare Nostrum

**Office:** Plaza de San Francisco, 12 - 41004, Seville (Spain)

**Account Number:** 0487 3191 0720 0008 1794

**BIC-SWIFT code:** GBMNESMMXXX

**IBAN CODE:** ES68 0487 3191 0720 0008 1794

### IF YOU NEED AN INVOICE, PLEASE FILL YOUR FISCAL DETAILS:

Name of company:   
Address:     City:     Zip:   
Remarks:     NIF/PASSPORT FISCAL NUMBER: