

## CTE Clinical Trials Europe- 19<sup>th</sup> to 21<sup>st</sup> November 2019

Passport details				
Passport number:		Issue date:		Place of birth:
Title	First Name	Last Name		
Personal Address				
City		Country/ State		
Post/ZIP Code		Country		
Telephone		Fax		
E-mail				

Invoice address (only if is not the same as the passport details shown above)				
Company Name				
Invoice address				
City		Country/ State		
Post/ZIP Code		Country		
VAT Number/ Registration Number*				

*Address won't be valid without a VAT or Registration Number*

Room Reservation Details – Rates valid from xxx to xxx.				
# ROOMS	TYPE OF ROOM	RATE PER NIGHT	ARRIVAL DATE	DEPARTURE DATE
	Standard single use	187 EUR		
	Double use Supplement	22 EUR		
	Terrace room Supplement	40 EUR		
	Sea View room Supplement	15 EUR		
Rates per room per night. Buffet breakfast included. 10%VAT included. City tax 1,21EUR per person & day not included				
Check in: 15:00 / Check out: 12:00				

Booking Conditions & Cancellation Policy
<ul style="list-style-type: none"> <li><b>From confirmation to 15 days before arrival</b>, in case of cancellation, one night of stay will be charged.</li> <li><b>From 14 days to the arrival</b> in case of cancellation or modification, any <b>no shows</b> and <b>early departures</b>, 100% of the total stay will be charged.</li> <li>Please be informed that reservations and rates will be subject to availability of the hotel.</li> </ul>

Credit Card Information	
<i>In order to guarantee your reservation, please supply your credit card details (Credit card holder and guest must be the same person)</i>	
Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club
Cardholder's Name	
Credit Card Number	
Expiry Date	

I authorize Hotel Barcelona Princess to charge one night of the total reservation at confirmation and any charges applicable according to hotel Booking Conditions and Cancellation Policies on the Credit Card provided above.

I have read and accept the Booking Conditions and Cancellation Policies detailed above.

Please complete and sign this form in **BLOCK CAPITALS** and email or fax back to the Reservations Dpt at:  
 Fax: +34 93 356 10 22 - Email: [bcn.reservas@princess-hotels.com](mailto:bcn.reservas@princess-hotels.com)

**The reservation won't be valid until the receipt of the confirmation from the Hotel**

Signature	Date
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