

RESERVATION FAX FORM / FORMULARIO RESERVA

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MEETING/EVENTO: Joint Association of American Law Schools
(AALS) / European Law Faculties Association
(ELFA) Conference

DATE/ FECHA: From the 1st June to 4 June '03

HOTEL: RESIDENCIA UNIVERSITARIA TORRE GIRONA
BARCELONA
PASSEIG DELS TILLERS, 19
08034 BARCELONA
SPAIN

NAME:.....
ADDRESS:
CITY/STATE: COUNTRY:
TEL: FAX:
EMAIL:
ID/PASSPORT NUMBER:

ROOM TYPE:	RATE:
TIPO DE HABITACION:	PRECIOS:
SINGLE ROOM	<input type="checkbox"/> 48 EURO
DOUBLE ROOM	<input type="checkbox"/> 76 EURO
NUMBER OF ROOMS: _____	

7% VAT is included

ARRIVAL DATE/FECHA DE LLEGADA: _____/_____/03 TIME: _____
DEPARTURE DATE/FECHA DE SALIDA: _____/_____/03 TIME: _____

(Check-in time is 3:00 PM; Check-out time is 12:00 Noon)

PAYMENT/PAGO:

To guarantee your room reservation, please fill in the following:
Rellene los datos que a continuación se detallan para garantizar su reserva:

CREDIT CARD

Master Card/Eurocard Visa

Credit card number/nº tarjeta crédito:

Expiration date/Fecha de caducidad:

Card holder's name/a nombre de:

Please note: MasterCard, Visa or cash are the only forms of payment accepted.

To ensure you receive the preferred group rate listed above, please return this form before **1st April '03** by fax to the AALS Headquarters in Washington, DC at (202) 296-8869. **Please note: Make your hotel reservations early because the room block may fill prior to the cut-off date.**

Reservations cannot be made by telephone.

NOTE: Reservations must be cancelled 10 days prior to arrival to avoid being charged for one night if the stay is less than one week or two nights if the stay is for more than one week. The full stay will be charged in case of no show.

SIGNATURE: _____

*Please note we need to get your signature to process your booking.