



Usó Oficial



**17º Congress of the WFBSC - Buenos Aires – October 26-29, 2008**

**HOTEL RESERVATION FORM PARTICIPANT (PLEASE TYPE OR PRINT IN CAPITAL LETTERS)**

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_  
**Street Address** \_\_\_\_\_ **City** \_\_\_\_\_  
**Province/State** \_\_\_\_\_ **ZIP Code** \_\_\_\_\_ **Country** \_\_\_\_\_  
**Fax ( )** \_\_\_\_\_ **Phone ( )** \_\_\_\_\_  
**E-mail** \_\_\_\_\_

**RESERVATION PROCEDURES**

**Deposit:** In order to confirm a reservation a two night deposit is required. For that reason, a credit card information (Visa, MasterCard, or American Express) is requested as guarantee (no charge will be done).

**Balance:** The total of nights as well as all additional charges shall be paid directly to the hotel.

**Cancellations:** Full refund less US\$20 administrative charge will be granted for cancellations received until July 31<sup>st</sup>, 2008. For cancellations received between August 1<sup>st</sup> and August 31<sup>st</sup>, 2008 there is a charge of one-night penalty. Cancellations received between September 1<sup>st</sup> and September 22<sup>nd</sup>, 2008 will have a charge equivalent to a two nights' rate. Cancellations received after September 22<sup>nd</sup>, 2008 and no-show(s) will have a charge equivalent to the 100% of total nights reserved. All cancellations or changes must be in writing to the General Secretariat.

**HOTEL CATEGORY SELECTION**

Please complete:

Hotel 5*	Rate US\$	Check-in date	Check-out date	# of rooms	Two nights deposit per room US\$	Subtotal US\$
Sheraton Buenos Aires Sgl/DbI Standard*	230				460	
Sheraton Buenos Aires Sgl/DbI Executive*	279				558	
Sheraton Park Tower**	327				654	
TOTAL US\$						

\* Breakfast is not included

\*\* Breakfast included

I wish to guarantee:

- Early check-in (to guarantee, an additional night has to be charged)
- Late check-out (to guarantee, an additional night has to be charged)

Room type:

- Double / twin ⇄⇄
- Double one bed ⇄
- Single ⇄

Disabled (Please specify any special requests)

SPECIAL REQUEST

The published rates are quoted in US dollars, on a nightly basis and include VAT (currently 21%). Reservations will be handled on a first-come, first-serve basis. Confirmation of the reservation will be sent to you in due course, including the hotel assigned and its information. Check-in time: 15:00 hrs. Check-out time: 12:00 hrs.

**PAYMENT**

**IMPORTANT:** this portion must be filled out completely. Requests for reservation without complete payment information will not be processed and confirmed. **If Credit Card Security Code (or bank transfer slip) is not provided hotel reservation will not be confirmed.**

- Credit Card, please mark:
  Visa (VI) (13 to 16 digits)
  MasterCard (MC) (16 digits)
  American Express (AX) (15 digits)

I hereby authorize the **Sheraton** to debit from my credit card account the total amount of the required deposit.

**Card Number:** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ / \_\_\_\_\_  
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 Month Year

**Cardholder's Name** \_\_\_\_\_ **Security Code:** \_\_\_\_\_  
Name as it appears on card VI / MC: final three digits on reverse side of the card AX: final four digits on front of the card (upper level)

**Date** \_\_\_\_\_ **Signature:** \_\_\_\_\_

I HEREWITH ACCEPT THE CONDITIONS STATED IN THIS FORM

Please return this form to: **Congresos Internacionales S.A. Av. Santa Fe 1970 – 1<sup>st</sup> floor - Buenos Aires - Argentina**  
 Tel: (54.11) 4812 3444 Fax: (54.11) 4813 0073 - E-mail: pbuczak@congresosint.com.ar - E.V.T.(Travel Agency) – Leg. Nº 7526 Res. 97/93