

ACCOMMODATION RESERVATION FORM

Person Details

First name _____ Family name _____

Address _____

Postal code _____ City _____

Country _____

Phone _____ Fax _____

Email _____

Accompanying person details (room share, max 3 persons in the same room)

Number of accompanying persons _____

First name _____ Family name _____

First name _____ Family name _____

Please contact me for a group reservation (min. 11 persons)

Room reservation (please choose only one hotel and room type)

Arrival date ___/___ 20___ Departure date ___/___ 20___ Total number of nights ___

Sokos Hotel Hamburger Börs, Kauppiaskatu 6, 20100 TURKU, Finland

Single room (standard) **99 EUR/room/night**

Double room (standard) **109 EUR/room/night**

(when choosing a double room accompanying person details must be filled in)

Sokos Hotel City Börs, Eerikinkatukatu 11, 20100 Turku, Finland

Single room (standard) **62 EUR/room/night**

Double room (standard) **72 EUR/room/night**

(when choosing a double room accompanying person details must be filled in)

Sokos Hotel Seurahuone, Eerikinkatu 23, 20100 Turku, Finland

Single room (standard) **72 EUR/room/night**

Double room (standard) **82 EUR/room/night**

(when choosing a double room accompanying person details must be filled in)

Room rates are special rates for EANA 2007. Rates include VAT 8%, buffet breakfast and also morning sauna for guests staying at Sokos Hotel Hamburger Börs.

HOTEL CONFIRMATION

We have reserved your reservation above. Your booking number is _____

Turku ___ / ___ 20___ _____

All changes and cancellations must be done directly to the hotel by email sales.turku@sokoshotels.fi or by fax. +358 (0)2 231 1010.

Payment and cancellation (Please indicate your means of payments)

Bank Account

Name of account holder	TOK Liiketoiminta Oy
Bank name	Sampo Bank plc
Bank address	HELSINKI FINLAND
SWIFT Address	PSP BfiHH, FI6780001101441930
Bank account number	800011-1441930

We kindly ask you not to send any cheques. **Please notice, no separate invoice will be sent.**
Please notice to add all additional costs to the room rate to cover transfer charges
Please note this payment must be done when reservation is made or latest 6th September 2007.

Credit Card payment

We hereby allow TOK Liiketoiminta Oy in Finland to charge the following credit card:

Visa Eurocard Mastercard Diners Amex

Card Owner (company etc) _____

Card Holder (individual) _____

Card Number _____

Expiration date _____

Card Verification value (CVC-code) _____ (3 last digits)

Total Amount EUR _____

Picture of both sides of the credit card must be enclosed with the reservation form.

If we receive your written cancellation before 14th September 2007, no cancellation fee will be applied.

If we receive your written cancellation 14th - 28th September 2007 we will refund 50% of the total value of this reservation.

In case of no shows and cancellations received after 28th September 2007 there will be no refunds. Exceptions include illness and cases of force majeure.

By returning information on this reservation form I declare that I have read and accepted payment and cancellation terms.

Date ___/___ 20___ Signature and clarification _____

**PLEASE RETURN THIS RESERVATION FORM LATEST 3rd September 2006 BY FAX TO
Sokos Hotels, Turku / Sales Service Centre, FAX +358 (0)2 231 1010**

For further information, please don't hesitate to contact us.

**Sokos Hotels, Turku (TOK Liiketoiminta Oy)
Sales Service Centre, Turku
PO BOX 186, 20101 TURKU**

Tel. +358 (0)2 337 3800 Fax. +358 (0)2 231 1010 Email sales.turku@sokoshotels.fi