

Towards Operational Excellence

organize

sponsor



Mar del Plata 17 - 20 november 2015

Surname:				Name:				
Institution:				Address:				
City:		Province:			Zip code:			
Country:		Telephone			E-mail:			
			R	ESERVATION				
	Rates are	in ARS (Pesos Arger	ntinos) and VA	AT included (21%)). Rates per room/ ı	night.		
Hotel		Room type	Check IN	Check OUT	Rate per day	Total stay	Specific requirements	
					\$	\$	0	
					\$	\$		
							O	
(1) Early check In (*) (2) Late Check Out (*) (3) Double (double bed) (4) Double (two beds) (5) Special requirements (*)to reserve, it is necessary to pay the extra night								
	PA	YMENT TERMS -	- CANCELL	.ATIONS				
No penalties for cancellations in For cancellations received afte cancellation. No reimburseme CANCELLATIONS: Must be ser	r November 2 nt will be ma	2, 2015 (cancelled roade.	ooms, cancell	ed nights or no-s	hows) the hotel wi	ill charge 2 (tv	vo) nights per	
* To guarantee the	eservation, p	please complete with	your credit c	ard details. Other	rwise, the reserva	tion will not b	e processed.	
		CRED	IT CARD IN	IFORMATION				
Credit card		Visa		MarterCard		Americar	n Express	
Name and Surname Expiration date					Bank Security cod	de		
Signature			Date					
•	ne use of this	s credit card to guar	antee the res	ervation based o	n the hotel cance	llation policie	- S.	
1 4441101120 11						poo.o	- -	

