

## 3<sup>rd</sup> INTERNATIONAL SYMPOSIUM ESG 2006, Grenoble, France

### Hotel Booking Form

To fill in CAPITAL LETTERS and return by fax before August, 8, 2006 to  
 ALL VOYAGES / Service Congrès - 58, avenue Potié - 38400 St Martin d'Hères - France  
 Tél : +33 (0)4 76 25 99 30 Fax : 33 (0)4 76 25 61 81

FAMILY NAME : ..... Surname : .....

Company : .....

Address : .....

Postal Code : /\_/\_/\_/\_/\_/\_/ City : ..... State : .....

Country..... Tel..... Fax.....

Email.....

#### 1- HOTEL ROOM BOOKING

Arrival /\_/\_/\_/\_/\_/ 2006                      Departure /\_/\_/\_/\_/\_/ 2006                      Means of transportation  
 Number of nights \_\_\_\_                      Number of persons \_\_\_\_                      £ Train £ Plane £ Car

INDICATIVE TARIFFS Prices are given par night and per room, including breakfast and local taxes

Hôtel	Single	Twin	Deposit due
2 stars	55 to 72 €	64 to 91 €	40 €
3 stars	84 to 120 €	102 to 143 €	70 €

I book a £ single room, or a £ Double twin

Amount of the deposit \_\_\_\_ €

Booking fees : 13 €

**TOTAL amount to pay for the booking                      €**

Bookings without accompanying payment will not be processed.

Past August 8, 2006, hotel rooms available are not guaranteed.

If necessary, I accept a room in a £ lower or £ upper category.

#### CANCELLATION

All cancellation must be sent by written (fax or e-mail) to ALL Voyages;

Before August, 8, 2006 : refund of the deposit only. From August 22, 2006, no refund.

#### MEANS OF PAYMENT

£ Bank Transfer. All bank transfer charges are at the expense of the participant.

Account Holder : SARL ALLEVARD VOYAGES - Bank name : Banque de Savoie - Address : Banque de Savoie - Allevard

Bank Code : 10548                      Desk Code 00017                      Account Number : 00044170023                      Key : 12

IBAN : FR76 1054 8000 1700 0441 7002 312                      Swift Code : BSAVFR2C

Please add in the payment's concern section : ESG 2006 + Name of the participant.

Send the copy of the bank transfer receipt, by fax or surface mail, to ALL Voyages/Service Congrès.

£ Check enclosed, drawn in Euros, to the order of ALL Voyages, for an amount of \_\_\_\_\_€

£ Credit Card                      £ Visa                      £ Master/Eurocard

I hereby authorize the Agency ALL Voyages to withdraw from my account the amount of \_\_\_\_ €, on my credit card :

Card Number /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/

Expiry Date /\_/\_/\_/\_/\_/ Cryptogramm (last three numbers at the back of the card) \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

- Date and signature

### 3<sup>rd</sup> INTERNATIONAL SYMPOSIUM ESG 2006, Grenoble, France

**Tour booking Form**  
 To fill in CAPITAL LETTERS and return by fax before August, 8, 2006 to  
 ALL VOYAGES / Service Congrès - 58, avenue Potié - 38400 St Martin d'Hères - France  
 Tél : +33 (0)4 76 25 99 30 Fax : 33 (0)4 76 25 61 81

FAMILY NAME : ..... Surname : .....

Company : .....

Address : .....

Postal Code : /\_/\_/\_/\_/\_/\_/ City : ..... State : .....

Country..... Tel..... Fax.....

Email.....

**TOURS**

Tariffs are given for a minimum number of participants. Tariffs will be updated according to the final number of registrations.  
 Participants will be informed 14 days before their arrival about the eventual changes. Please note that more registrations = lower tariffs !

	<u>Tours</u>	<u>Tariffs</u>	<u>Number of persons</u>	<u>Days</u>
1	Grenoble City	15 €	40	week
2	Caves de la Chartreuse	22 €	40	Week
3	Grottes de Choranche	29 €	40	week
4	Mont-Blanc Tour*	69 €	40	Saturday 2, Sept.
* Departure from Grenoble in the morning, arrival in Geneva, end of the afternoon				

I confirm my choice for the tour N° \_\_\_\_\_ x ..... person (s) = ..... €  
 TOTAL \_\_\_\_\_ €

**MEANS OF PAYMENT**

£ Check enclosed, drawn in Euros, to the order of ALL Voyages, for an amount of \_\_\_\_\_€

£ Credit Card      £ Visa      £ Master/Eurocard

I hereby authorize the Agency ALL Voyages to withdraw from my account, the amount of \_\_\_\_ €, on my credit card :

Card Number /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/ /\_/\_/\_/\_/\_/

Expiry Date /\_/\_/\_/\_/\_/ Cryptogramm (last three numbers at the back of the card) \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

- Date and signature