

REGISTRATION FORM

Surname_____

First Name_____

Address_____

Post Code_____ City_____

Country_____

Arrival (Date/Time)_____ Flight number_____

Departure (Date/Time)_____ Flight number_____

Phone_____ Fax_____

Email_____

I will share my room with

Surname_____ First Name_____

Please arrange a transfer for me (Arrival- Departure) (YES/ NO)_____

The cost is E 5 per person, to be paid at the registration desk at your arrival.

PACKAGE (all the prices given are per person, based on two people sharing a double room). The

Package includes:

5 nights accommodation *Breakfast-buffet--* Half Board - Drinks (water and local wine) included with the meals. Hospitality Kit – files – badges - etc..* Welcome Drink- - " Apal Audience " given by His Holiness the Pope (on Wednesday morning) -* Full day guided tour to the Historical Centre of Rome (lunch included) *Victory Banquet – *Service and Taxes.

COST OF THE PACKAGE HOTEL SHERATON *****

Half Board (Double room –per person) Euro 665.00

Half board (Single room) Euro 825.00

Note: All the expenses relative to the transfer of the deposit have to be paid by the person who books the package.

Please transfer the deposit (150.00 Euro per person- credit transfer) to ENRICO BASTA

Bank Intesa San Paolo –Ag: 71 Roma Italy

Iban code: : IT 20CO30690330810000000039

BIC : B C I T I T M M

Please return this form not later than August 10, to ENRICO BASTA – Viale Oscar Sinigaglia 4 –
00143 Roma

Mail this Registration Form to ENRICO BASTA: enricobasta@incontridibridge.com)

Signature_____ Date_____