



**Best Western Master Hotel (4 Stars \*\*\*\*) Brescia, Italy**

**HOTEL RESERVATION FORM**

*7<sup>th</sup> IBIMA Conference  
December 14-16, 2006.*

Guest Name \_\_\_\_\_

Company/University \_\_\_\_\_

Tel. \_\_\_\_\_ Fax \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_ DEPARTURE DATE \_\_\_\_\_ # OF NIGHTS \_\_\_\_\_

**I WOULD LIKE TO RESERVE:**

Smoking Room     Non-Smoking Room     Single Room     Double Room

**Single Room standard:**    € 88 Euro per night

**Double Room standard:**    € 124 Euro per night

Above-mentioned rates are daily, per room and include buffet breakfast and all taxes.

**Please include credit card information when you make your booking**

American Express     Visa     Master card     Diners Club     Euro card

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name As it appears on the card: \_\_\_\_\_ Signature: \_\_\_\_\_

***COMMENTS / SPECIAL REQUESTS***


Policy Penalty of the rooms: In case of no show first night will be charged. Final Date for cancellation without penalty: December 08, 2006 00:00.

Please fax this form directly to the hotel by latest December 08, 2006. Reservations received after this date will be subject to availability.    Hotel Fax: +39 030 370 1331

You can also scan and e-mail the form to the hotel at: [master.bs@bestwestern.it](mailto:master.bs@bestwestern.it)