

Seminaris CampusHotel Berlin Takustr. 39, 14195 Berlin

Your reservation number: _____

Booking requests form for the allotment of Deutsche Gesellschaft für Zerstörungsfreie Prüfung e.V. with the code "DIR2011" at the Seminaris CampusHotel Berlin.

The allotment will be ope	en for bookings late	est: 20.04.2011		
Name:				
Adresse:				
Telephone number:				
Fax number:				
E-mail:				
Arrival: Number of single roo	oms at the rate of	€ 114,50	Departure:	
Number of double ro	ooms at the rate of	€ 147,50		
including Seminaris-	breakfast buffet an	nd free using of sauna/fi	itness area, tax	
Reservation guarant	teed by cedit card			
Credit card type:				
Card number:			expiry: /	
For payment we accept al Club).	l common credit car	rds (Visa, Mastercard/Eu	urocard, American Express	, Diners
			on the day of departure the be settled by me upon the	
A cancellation free of ch late cancellation or no sh			For all cancellations after t	that date a
I herewith confirm and gu	uarantee this bookin	ng with my above mention	oned credit card.	
Name, Signature, Stamp,	 Date			
Please return this resedent by fax to: +49 (0)			ısHotel Berlin, reservat to: berlin@seminaris.d	
THIS BOOKING IS	ONLY VALID WI	TH RECONFIRMATION	ON OF THE HOTEL!!!	
Thank you very much fo	r your reservation.	We are pleased to con	firm your booking.	

Hotel Signature, Stamp, Date