

e.Society / Mobile Learning - 2006
Dublin, 13th/16th July 2006

Please complete this form and return with payment, no later than **May 30th, 2006** to :

Viagens Abreu S.A.,

Congress Dept. c/o: Helena Desidério - Av. 25 de Abril, 2 2799-556 Linda-a-Velha

Phone: 351.21415 61 22 Fax : 351.21415 63 83/4 hdesiderio.lisboa@abreu.pt

1. PARTICIPANT

MR / MS _____ (Last Name) _____ (First Name)

INSTITUTION _____

ADDRESS _____ CITY _____ COUNTRY _____

PHONE _____ TELEFAX _____ E-MAIL _____

2. ACCOMPANYING PERSON(S)

MR / MS _____ (Last Name) _____ (First Name)

MR / MS _____ (Last Name) _____ (First Name)

3. HOTEL INFORMATION

HOTEL	CATEGORY	SINGLE	DOUBLE
QUALITY	***	128,00 €	140,00 €
TEMPLE BAR	***	120,00 €	155,00 €
		160,00 €(weekend)	190,00 €(weekend)

4. ACCOMMODATION

Please reserve my Accommodation in the following Hotel:

1st Choice Hotel _____ • 2nd Choice Hotel _____ Single • Double

Arrival ___ / ___ / 2006 • Departure ___ / ___ / 2006 • Total Nights _____

___ night(s) X ___ room(s) X _____ **(A) SUB TOTAL** _____

(If choices are already fully booked , we will confirm another Hotel)

5 . METHOD OF PAYMENT

Please charge my Credit Card VISA___ MASTERCARD___AMERICAN EXPRESS___ DINERS___

Credit card Number _____ Expiry Date ___ / ___

CVV _____ (last 3 numbers on the back side) Owner's Name _____

Address _____

Bank Transference to:

In this case, please send us
a copy of the Bank Transference

→ Banco BPI, SA
Centro de Empresas Porto
Viagens Abreu S.A.
Account number : 1292463-000-001
Bank Swift BBPIPTPL
IBAN nº: PT.50001000001292463000131

BOOKING & PAYMENT CONDITIONS

Full payment must accompany this Application Form **no later than May 30th 2006**. Viagens Abreu will send you confirmation by fax or email. Changes in reservations will be submitted to an administration charge of € 5 . Cancellations until May 30th = Deposit of two first nights, not refundable. Cancellations between May 31st to the June 16th = Four nights , will be charged. After June 17th = All reservations will not merit a refund.

Date : _____ Signature : _____